



National Highway Traffic Safety Administration

Dear Crash Data Researchers/Users:

Thank you for choosing crash data from the National Highway Traffic Safety Administration (NHTSA) for your research or other use. The information contained in this motor vehicle crash report is collected, maintained and distributed in accordance with Public Law 89-564. In accordance with this Public Law, NHTSA is required not to release any case information until completion of quality control procedures. These procedures include a review of the case material to extract all names, licenses and registration numbers, non-coded interview material, non-research related researcher comments in the margins, non-factual data, and the production number portion of the vehicle identification number (VIN).

If you requested NHTSA to query its database files in order to identify a specific crash, then that query was made using non-personal descriptors you provided for use in our search. This motor vehicle crash may have been identified from a data search and matches the general, non-personal descriptors you provided, but we cannot confirm that this is the specific crash report you requested.

If you have any questions with regard to the above procedures, please contact the Field Operations Branch, Crash Investigation Division, National Center for Statistics and Analysis at 202-366-4820. Again, please be advised that we cannot confirm that this is the case that you have specifically requested nor can we certify the information to be correct.

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National Highway Traffic Safety Administration

CASE SUMMARY

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

PSU 48

CASE NO.227k

TYPE OF ACCIDENT

Car / Car - Acute Angle

A. DESCRIPTION OF THE ACCIDENT SEQUENCE AND ACCIDENT PECULIARITIES

(Provide a summary of the accident sequence as well as any particular event of the accident that is noteworthy. Injury mechanism and vehicle crashworthiness is the focus, not driver culpability. Do not include any personal identifiers.) V1 was traveling east on a five lane divided roadway

approaching an intersection controlled by a traffic signal V2 was traveling west approaching the intersection in the left turn lane. V3 was traveling north and was stopped at the intersection waiting for the signal light to change. V1 crossed through the intersection. V2 proceeded into the intersection and was attempting to turn left to The front of V1 struck the right side of V2. travel south. V1 rotated clockwise and came to rest in the intersection. V1 rotated slightly clockwise and slid sideways with its left side leading. V2 rolled over onto its top and continued to rotate clockwise. While on its top, the left rear of V2 contacted the right front of V3. V2 came to rest on its top. V3 came to rest at impact. V1 and V2 were towed from the scene due to disabling damage. V3 was driven The unrestrained driver of VI was transported to a trauma center where he was treated and released. unrestrained right front passenger was hospitalized at the The restrained driver and passenger in V2 trauma center. did not require medical treatment. The driver and passenger

		B. VEHIC	LE PROFILE	S)	,
	Class		Most Sever Based on Vehi		_
Vehicle No.	of Vehicle	Year/Make/Model	Damage Plane	Severity Description	Component Failure
1	Subcompact 1	986 (Chorrellas (c			
	1	986/Chevrolet/Spec	trum Front	Moderate	None
2	Pick Up]	989/GMC/S-15	Right	Moderate	None
3	Pick Up 1	988/Chev/S-10	Front	Unknown	Unknown
	-				

			C. PE	RSON PROFIL	E(S)		
Vehicle	Person	Seat	Restraint		Most S (TO BE COMPLE)	Severe TED BY	Injury ZONE CENTER)
No.	Role	Position	Use	Body Region	Injury Type	AIS	Injury Source
1	Driver E	ront Left	None				
1 12	ssenger	Front kt.	None				
2	Driver F	ront Left	Lap/Shou				
2 F	assenger	Ft. Kt.	Lap/Shou				
3	Driver F	ront Left	Unknown				
3 1	assenger	Ft. kt.	Unknown				
	L		<u> </u>	<u> </u>		L	

Body Region

Abdomen Ankle-foot Arm (upper)

Back-thoracolumbar spine

Brain Chest Ears Eye

Elbow Face Forearm

Head – skull Heart Kidneys Knee

Leg (lower) Liver

Lower limbs(s) (whole or unknown part)

Mouth

Neck-cervical spine

Nose

Pelvic - hip

Pulmonary - lungs

Shoulder Spleen Thigh

Thyroid, other endocrine gland

Upper limb(s) (whole or unknown

part) Vertebrae Whole body Wrist – hand

Injury Type

Abrasion
Amputation
Avulsion
Burn
Concussion
Contusion
Crush

Detachment, separation

Dislocation

Fractur

Fracture and dislocation

Laceration Other

Perforation, puncture

Rupture Sprain Strain

Total severance, transection

Unknown

Abbreviated Injury Scale

(1) Minor injury

(2) Moderate injury(3) Serious injury

(4) Severe injury

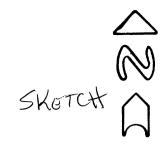
(4) Severe injury

(5) Critical injury

(6) Maximum (untreatable)

(7) Injured, unknown severity

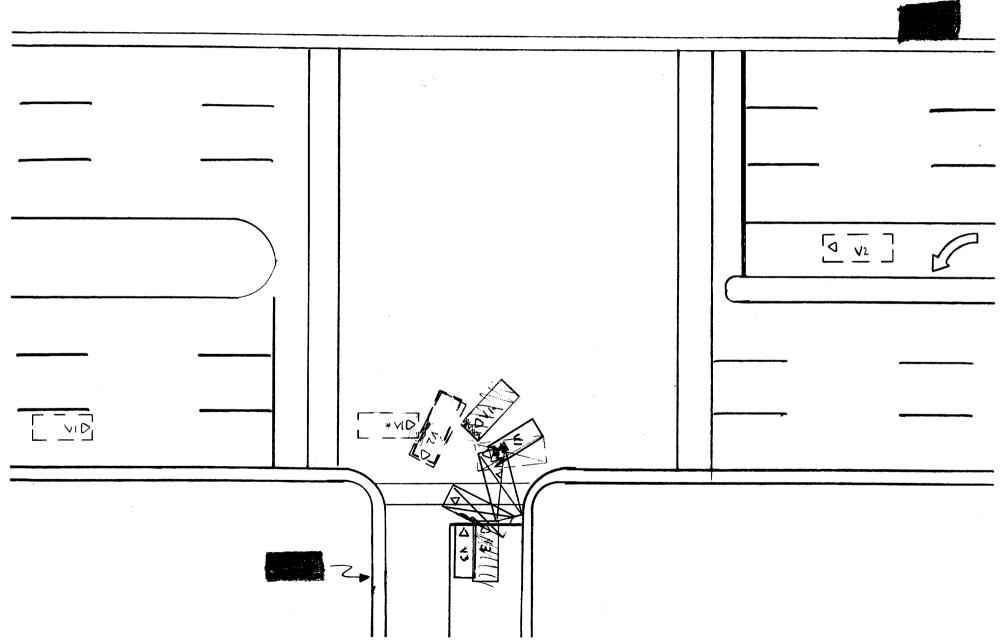
DO NOT SANITIZE THIS FORM



No PHYSICAL EVIDENCE

0 / 2 3 4 5 METERS P48-227K







National Highway Traffic Safety Administration

ACCIDENT COLLISION MEASUREMENT TABLE

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Primary Sampling Unit Number		se Number	-Stratum <u>2 2 7 K</u>
ACCIDENT COLL LEVEL I PHYSICAL EVIDENCE ABSENT	LISION DIAGRAM LEVEL II (Cont'd) physical evidence is present:		CRASH DATA
To be accomplished when there is no physical evidence present at the scene: * approximate vehicle orientation at impact and final rest * applicable road/roadway delineation (e.g., curbs/edge lines, lane markings, median markings, pavement markings, etc.) * applicable traffic controls (e.g., speed limit) * north arrow placed on diagram * sketch required	* document reference point and reference line relative to physical features present at the scene * scaled documentation of all accident induced physical evidence * scaled documentation of all roadside objects contacted * roadway surface type and condition of applicable roadways * grade measurements for all applicable roadways and at location of rollover initiation	Surfac Surfac Conditi Grade Measu	ion Good
LEVEL II PHYSICAL EVIDENCE PRESENT In addition to the level I tasks noted above, the following must be accomplished when	 scaled representations of the vehicle(s) pre-impact, impact, and final rest based upon either: a) physical evidence, or b) reconstructed accident dynamics 	d Grade (Measur (at locs	
Reference Point:	Reference line:		
ltem	Distance and D from Reference		Distance and Direction from Reference Line
NO EVIDENCE			

ltem	Distance and Direction from Reference Point	Distance and Direction from Reference Line

National Highway Traffic Safety Administration

ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

48

2. Case Number - Stratum

227K

IDENTIFICATION

3. Number of General Vehicle Forms Submitted

03

4. Date of Accident (Month, Day, Year)



5. Time of Accident

0735

Code reported military time of accident.

NOTE: Midnight = 2400

Unknown = 9999

SPECIAL STUDIES - INDICATORS

Check (1) each special study (SS14-SS18 below) that has been completed; code 1 for the checked special studies and 0 for the special studies not checked.

6. ___SS15 Administrative Use

 $\underline{\mathcal{O}}$

7. ____SS16 Pedestrian Crash Data Study

8. SS17 Impact Fires

_0

9. SS18

0

10. SS19

0

NUMBER OF EVENTS

11. Number of Recorded Events in This Accident

03

Code the number of events which occurred in this accident.

ACCIDENT EVENTS

For each event that occurred in the accident, code the lowest numbered vehicle in the left columns and the other involved vehicle or object on the right.

Accident Event Sequence Number	Vehicle Number	Class Of Vehicle	General Area of Damage	Vehicle Number or Object Contacted	Class Of Vehicle	General Area of Damage
12. <u>0 1</u>	13. <u>O</u>	14. <u>O</u>	15. <u>F</u>	16. <u>02</u>	17. <u>/ 5</u>	18. <u>R</u>
19. 0 2	20. <u>2</u>	21. 1 5	22. <u>T</u>	23. <u>3 1</u>	24. <u>O</u>	25. <u>N</u>
26. 0 3	27 . <u>0</u> 2	28. <u> 5</u>	29	30. <u>Ø</u> <u>3</u>	31. <u> </u>	32. <u> </u>
33. 0 4	34	35	36	37	38	39
40. 0 5	41	42	43	44	45	46

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

CODES FOR CLASS OF VEHICLE

- (00) Not a motor vehicle
- (01) Subcompact/mini (wheelbase < 254 cm)
- (02) Compact (wheelbase \geq 254 but < 265 cm)
- (03) Intermediate (wheelbase ≥ 265 but < 278 cm)
- (04) Full size (wheelbase ≥ 278 but < 291 cm)
- (05) Largest (wheelbase ≥ 291 cm)
- (09) Unknown passenger car size
- (11) Compact utility vehicle
- (12) Large utility vehicle (≤ 4,500 kgs GVWR)
- (13) Passenger van (≤ 4,500 kgs GVWR)
- (14) Other van (≤ 4,500 kgs GVWR)
- (15) Pickup truck (≤ 4,500 kgs GVWR)
- (18) Other truck (≤ 4,500 kgs GVWR)
- (19) Unknown light truck type
- (20) School bus
- (21) Other bus
- (22) Truck (> 4,500 kgs GVWR)
- (23) Tractor without trailer
- (24) Tractor-trailer(s)
- (25) Motored cycle
- (28) Other vehicle
- (99) Unknown

CODES FOR GENERAL AREA OF DAMAGE (GAD)

CDS APPLICABLE AND

OTHER VEHICLES

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back
- (T) Top
- (U) Undercarriage
- (9) Unknown

TDC APPLICABLE **VEHICLES**

- (0) Not a motor vehicle
- (N) Noncollision
- (F) Front
- (R) Right side
- (L) Left side
- (B) Back of unit with cargo area (rear of trailer or straight truck)
- (D) Back (rear of tractor)
- (C) Rear of cab
- (V) Front of cargo area
- (T) Top
- (U) Undercarriage
- (9) Unknown

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED

(01-30) - Vehicle Number

Noncollision

- (31) Overturn rollover
- (32) Fire or explosion
- (33) Jackknife
- (34) Other intraunit damage (specify):
- (35) Noncollision injury
- (38) Other noncollision (specify):
- (39) Noncollision details unknown

Collision With Fixed Object

- (41) Tree (≤ 10 cm in diameter)
- (42) Tree (> 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment
- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post

- (50) Pole or post (\leq 10 cm in diameter)
- (51) Pole or post (> 10 cm but \leq 30 cm in diameter)
- (52) Pole or post (> 30 cm in diameter)
- (53) Pole or post (diameter unknown)
- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail) (specify):

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify):
- (69) Unknown fixed object

Collision with Nonfixed Object

- (71) Motor vehicle not in-transport
- (72) Pedestrian
- (73) Cyclist or cycle
- (74) Other nonmotorist or conveyance
- (75) Vehicle occupant
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (79) Object fell from vehicle in-transport
- (88) Other nonfixed object (specify):
- (89) Unknown nonfixed object
- (98) Other event (specify):
- (99) Unknown event or object

National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

	OCCUPANT RELATED	24	Rollover
16	Driver Presence in Vehicle	24.	(0) No rollover (no overturning)
'0.	(0) Driver not present		Delles and design with the season of the sea
	(1) Driver present (9) Unknown		Rollover (primarily about the longitudinal axis) (1) Rollover, 1 quarter turn only
	(5) CHRIOWII		(2) Rollover, 2 quarter turns
17	Number of Occupants This Vehicle 02		(3) Rollover, 3 quarter turns
' ' '	(00-96) Code actual number of occupants		(4) Rollover, 4 or more quarter turns (specify):
	for this vehicle (97) 97 or more		
	(99) Unknown		(5) Rollover-end-over-end (i.e., primarily about the lateral axis)
			(9) Rollover (overturn), details unknown
18.	Number of Occupant Forms Submitted O λ		
	VEHICLE WEIGHT ITEMS		OVERRIDE/UNDERRIDE (THIS VEHICLE)
19.	Vehicle Curb Weight Code weight to persent	25.	Front Override/Underride (this Vehicle)
	Code weight to nearest 10 kilograms. (045) Less than 450 kilograms	26.	Rear Override/Underride (this Vehicle)
	(610) 6,100 kilograms or more		(0) No override/underride, or
	(999) Unknown		not an end-to-end impact
	-1,947 lbs x .4536 = $-1,883$ kgs		Override (see specific CDC)
	Source:		(1) 1st CDC
		ļ	(2) 2nd CDC (3) Other not automated CDC (specify):
20.	Vehicle Cargo WeightO, OOO		
	10 kilograms. (000) Less than 5 kilograms		Underride (see specific CDC)
	(450) 4,500 kilograms or more (999) Unknown		(4) 1st CDC (5) 2nd CDC
			(6) Other not automated CDC (specify):
	,lbs X .4536 =,kgs		
	RECONSTRUCTION DATA		(7) Medium/heavy truck or bus override
21.	Towed Trailing Unit		(9) Unknown
	(0) No towed unit (1) Yes—towed trailing unit		HEADING ANGLE AT IMPACT FOR
	(9) Unknown		HIGHEST DELTA V
22	Dogumentation of Trainatory Data		Values: (000)-(359) Code actual value
22.	Documentation of Trajectory Data for This Vehicle		(997) Noncollision
	(0) No (1) Yes		(998) Impact with object
	(1.,, 1.65		(999) Unknown
23.	Post Collision Condition of Tree or Pole	27.	Heading Angle For This Vehicle 0900
	(For Highest Delta V) (0) Not collision (for highest delta V) with	28.	Heading Angle For Other Vehicle 208
	tree or pole (1) Not damaged		198
	(2) Cracked/sheared		• • •
	(3) Tilted <45 degrees(4) Tilted ≥45 degrees		
ľ	(5) Uprooted tree(6) Separated pole from base		
	(7) Pole replaced		
	(8) Other (specify):		
1	(9) Unknown	ļ	

Cate- gory	Configur-	ACCIDENT TYPES (Includes Intent)
	A Right Roadside Departure	DRIVE OFF CONTROL/ TRACTION LOSS WITH VEH., PED., ANIM. OTHER UNKNOWN
Single Driver	B Left Roadside Departure	DRIVE OFF CONTROL/ ROAD TRACTION LOSS WITH VEH., PED., ANIM. OTHER UNKNOWN
-	C Forward Impact	PARKED VEN. STA. OBJECT PEDESTRIAN/ ANIMAL DEPARTURE OTHER UNKNOWN
	D Rear-End	20 22 24 28 29 30 (EACH • 32) (EACH • 33) STOPPED SLOWER DECEL. 21. 22. 23 28. 28. 27 29 OTHER UNKNOWN
II. Sane Trafficway Sane Direction	E Forward Impact	CONTROL/ CONTROL/ AVOID COLLISION AVOID COLLISION WITH OBJECT OTHER UNKNOWN
_	F Sideswipe Angle	44 45 46 (EACH - 48) (EACH - 49) SPECIFICS UNKNOWN OTHER
Se Se	G Head-On	50 51 (EACH • 52) (EACH • 53) SPECIFICS SPECIFICS UNKNOWN
Same Trafficway Oppiwite Direction	H Forward Impact	CONTROL/ TRACTION LOSS TRACTION LOSS WITH VEH. CONTROL/ OTHER CONTROL/ OTHER CONTROL OTHER UNKNOWN
=	l Sideswipe! Angle	(EACH • 66) (EACH • 67) SPECIFICS SPECIFICS UNKNOWN LATERAL MOVE OTHER
Change Trafficway Vehicle Turning	J. Turn Across Path	INITIAL OPPOSITE INITIAL BAME DIRECTIONS SPECIFICS SPECIFICS OTHER UNKNOWN
IV. Change Trafficw Vehicle Turning	K. Turn Into Path	TURN INTO SAME DIRECTION TURN INTO SAME DIRECTION TURN INTO OPPOSITE DIRECTIONS (EACH • 84) (EACH • 8 SPECIFICS OTHER UNKNOWN
V Intersecting Paths (Vehicle Damage)	L. Straight Paths	(EACH - 90) (EACH - 91) SPECIFICS SPECIFICS UNKNOWN OTHER
VI Miscel- laneous	M. Backing Etc.	22 23 OTHER VEH. OR OBJECT BACKING VEH. SS Other Accident Type SU Unknown Accident Type 00 No Impact

OTHER DATA	61. Rollover Initiation Object Contacted
56. Driver's Zip Code	
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify):	(1) Wheels/tires (2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown
58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance (7) Fire truck or car (8) Other (specify):	(0) No rollover (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction PRECRASH DATA
(9) Unknown	64. Pre-Event Movement (Prior to Recognition of Critical Event)
ROLLOVER DATA If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0. If GV24 = 9, then GV59-GV63 must equal 9.	 (01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane (05) Passing or overtaking another vehicle (06) Disabled or parked in travel lane
59. Rollover Initiation Type (O) No rollover (1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify):	 (07) Leaving a parking position (08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position) (13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event (97) Other (specify):
60. Location of Rollover Initiation (0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown	(98) No driver present (99) Unknown

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover	(57) Fence
(01-30) — Vehicle Number	(58) Wall
	(59) Building
Noncollision	(60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(33) Jackknife	(62) Fire hydrant
	(63) Curb
Collision With Fixed Object	(64) Bridge
(41) Tree (≤ 10 cm in diameter)	(68) Other fixed object (specify):
(42) Tree (> 10 cm in diameter)	(all) a man man all (apacht),
(43) Shrubbery or bush	(69) Unknown fixed object
(44) Embankment	(32, 23, 33, 33, 33, 34, 34, 34, 34, 34, 34, 3
	Collision with Nonfixed Object
(45) Breakaway pole or post (any diameter)	(71) Motor vehicle not in-transport
	(76) Animal
Nonbreakaway Pole or Post	(77) Train
(50) Pole or post (≤ 10 cm in diameter)	(78) Trailer, disconnected in transport
(51) Pole or post (> 10 cm but \leq 30 cm in	(79) Object fell from vehicle in-transport
diameter)	(88) Other nonfixed object (specify):
(52) Pole or post (> 30 cm in diameter)	(ee, emer nemmer esject (epeeny).
(53) Pole or post (diameter unknown)	(89) Unknown nonfixed object
, , , , , , , , , , , , , , , , , , ,	(22, 2.m.s.m.mod object
(54) Concrete traffic barrier	(98) Other event (specify):
(55) Impact attenuator	(22) State State (opposity)
(56) Other traffic harrier (includes quardrail)	(99) Unknown event or chicat



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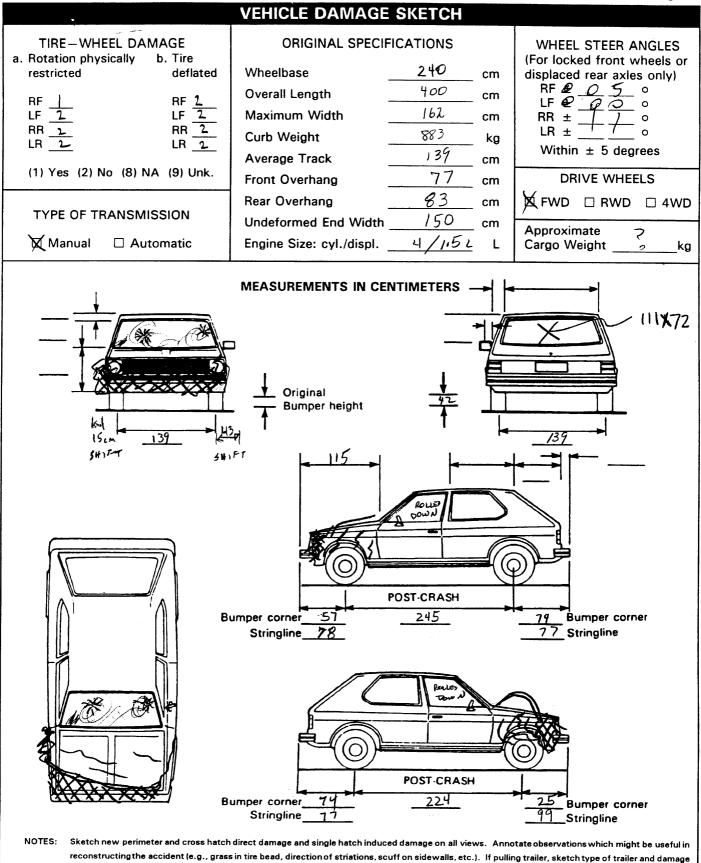
EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primar	y Sampling Unit	Number	4	<u>₹</u> 3	. Vehicle	e Numb	er				2
2. Case I	Number - Stratur	m _2	271	\leq							
			VEHICLE	DENTI	FICAT	ION					
VIN J	8 1 R F	777	18G8						Model Y	ear <u>8</u>	77
Vehicle Ma	ike (specify):	C HB	V		Vehicle	Model (s	specify):		58527	AUM	
			L(CATO	R		-				
	end of the dam amaged axle for		ct to the vel	nicle Ion	gitudina	l center	line or t	oumper o	corner fo	or end in	npacts
Specific I	mpact No.	Location	of Direct Da	amage			L	ocation	of Field	L	
	1 E	NTIRE FR	ONT								
		CBII	SH PROFI	I E INI	~ENITIN	METED	C				
NOTES: I	dentify the plane	e at which the	C-measurem	nents are				r, above	bumpe	r, at sill,	above
Ŋ	Measure and doc	ument on the	vehicle diagi	ram the	location	of max	imum c	rush.			
	Measure C1 to C	6 from driver t	o passenger	side in	front or	rear im	pacts a	nd rear t	o front	in side	
F	ree space value he individual C I ide taper, etc.	ocations. This	may include	e the fol	lowing:	bumper	lead, b	umper t			
Ų	Jse as many line	s/columns as r	necessary to	describ	e each o	damage	profile.				
Specific	Plane of Impac	Ct Midth	Damage Max	Field	C,	C,	C ₃	C₄	C _E	C ₆	±D
Impact Number	C-Measuremen	(CDC)	Crush	L	<u> </u>			C ₄	○ 6		10
1	BUMPER	128	C6	128	22	24	30	35	47	7/	0
	FLEE SPACE	<u> </u>			18	2	29	34	2 45	4 67	
	FINAL			<u> </u>	10	22	21	5 /	7.5	91	
							·		ļ		
				ļ	ļ						
										<u> </u>	
				 	-						
			 	ļ	 		 		 	 	

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	<u>94.5</u>	inches	x	2.54	=	<u>240</u> cm
Overall Length	157.4	inches	x	2.54	=	399.7 cm
Maximum Width	63.6	inches	x	2.54	=	<u>/61.5</u> cm
Curb Weight	1,947	pounds	x	.4536	=	, <u>\&\\ 3</u> kg
Average Track	54.7/54.3.	inches	x	2.54	=	cm
Front Overhang		inches	x	2.54	=	cm
Rear Overhang		inches	x	2.54	=	cm
Undeformed End Width		inches	x	2.54	=	cm
Engine Size: cyl./displ.		сс	x	.001	=	L
		CID	x	.0164	=	L



Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

received on the back of this page.

				NORKSHE	El			
		c	ODES FOR	OBJECT COI	NTACTED			
(01-30)	 Vehicle Nu 	mber		(5	7) Fence			
				(5	8) Wall			
Noncoll	ision			(5	9) Building			
	Overturn - ro			(6	0) Ditch or	culvert		
	Fire or explosi	ion		•	 Ground 			
	Jackknife				Fire hyd	lrant		
(34)	Other intrauni	t damage (speci	fy):	•	3) Curb			
					4) Bridge			
	Noncollision in			(6	8) Other fi	xed object (specity):	
(38)	Other noncoll	ision (specify):		16	O) Hakaasa	e fixed obje		
1391	Noncollision	- details unknov	A/D	_ 10	e) Unknow	n fixed obje	:01	
(33)	Noncomsion -	- details diskilov	VII	Collin	sion with M	onfixed Obje	act	
Collisio	n With Fixed O	hiect				ehicle not in		
	Tree (≤ 10 ci				2) Pedestri		r-transport	
	Tree (> 10 ci			•	3) Cyclist			
	Shrubbery or						or conveyan	ce
	Embankment			,,	.,			
				(7	5) Vehicle	occupant		
(45)	Breakaway po	ole or post (any o	diameter)		6) Animal	•		
				(7	7) Train			
	akaway Pole o			(7	8) Trailer,	disconnecte	d in transpo	rt
		≤ 10 cm in dian					icle in-trans	
(51)		> 10 cm but ≤	30 cm in	(8	8) Other n	onfixed obje	ct (specify):	
.=	diameter)				 			
		> 30 cm in dian diameter unknov		(8	9) Unknow	n nonfixed	object	
(00)	Tole of post (diameter dikilov	****	(9	8) Other e	vent (specify	/):	
	Concrete traff			10	0) 11 1		1.	
	Impact attenu			(9	9) Unknov	n event or o	object	
(56)	Other traffic t						,	
		parrier (includes	_					
		parrier (includes	_	_				
				- SIFICATION E	BY EVENT N	IUMBER		
				- SIFICATION E				
Accident				- SIFICATION E	BY EVENT N (4) Specific	IUMBER (5) Specific	(6)	
Event	(specify):	DEFORMA ⁻ (1) (2) Direction	TION CLASS	(3)	(4)	(5)	(6) Type of	(7)
Event Sequence	(specify):	DEFORMA (1) (2) Direction of Force	Incremental Value of	(3) Deformation	(4) Specific Longitudinal or Lateral	(5) Specific Vertical or Lateral	(6) Type of Damage	Deformation
Event	(specify):	DEFORMA ⁻ (1) (2) Direction	TION CLASS	(3)	(4) Specific Longitudinal	(5) Specific Vertical or	(6) Type of	
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	DEFORMA (1) (2) Direction of Force	Incremental Value of	(3) Deformation	(4) Specific Longitudinal or Lateral	(5) Specific Vertical or Lateral	(6) Type of Damage	Deformation
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent
Event Sequence	(specify):	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	Deformation Extent

		COLLISI	ON DEFORMA	TION CLAS	SIFICATIO	N	
HIGHEST	DELTA "V"		•				
Accident Event Sequence Number	Object Contacted	(1) (2 Direction of Force	on Deformation	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4.01	5. <u>0 %</u>	6	<u> 7. F</u>	8. <u>D</u>	9. <u>£</u>	10. <u>W</u>	11. <u>0</u> 3
Second Hi	ghest Delta "V	, n					
12	13	14	15	16	17	18	19
		CR	USH PROFILE	IN CENTIM	ETERS		
			damage described ace below. (ALL N				d
HIGHEST I	DELTA "V"						
20. 	21. 	C ₂		C ₄	С _б	C ₆	22. ±D
128	018	<u>022</u>	029	<u>034</u> C	<u>145</u> <u>0</u>	<u>67</u> ±	000
Second Hig	ghest Delta "V						
23. 	24. 			C ₄	С _Б	C ₆	25. ±D
			- -				
l	s Documented Coded on The ed File?	<u>O</u>	7. Researcher's Asof Vehicle Dispo (0) Not towed dowehicle dama (1) Towed due towehicle dama (9) Unknown	sition ue to ge o	n	I Wheelbase _Code to the earest centimet Inknown	<u>240</u> ter
				94	. <u>5</u> inches X 2.!	54 = <u>240</u>	entimeters

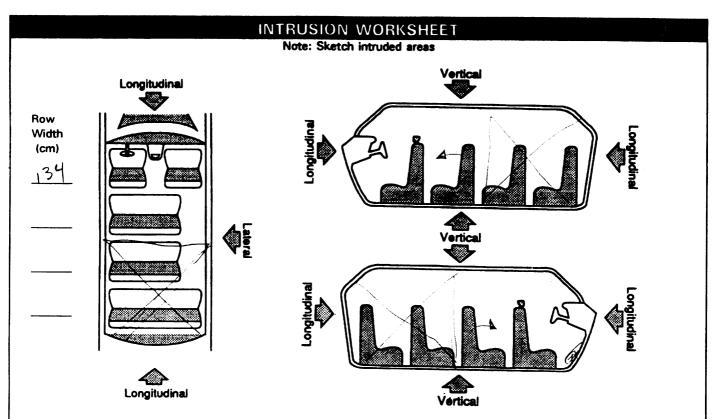
29.	Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? (0) No post manufacturer modifications (1) Yes - post manufacturer modifications (specify): (Include photograph of CERTIFICATION PLACARD in case report) (9) Unknown if vehicle is modified	_0	34. Fuel Tank-1 Location 35. Fuel Tank-2 Location (0) No fuel tank (1) Aft of center of the rear wheels (rear axle) centered (2) Aft of center of the rear wheels (rear axle) left side (3) Aft of center of the rear wheels (rear axle) right side (4) Forward of center of the rear wheels (rear axle) centered
30.	Fire Occurrence (0) No fire Yes, fire occurred (1) Minor (2) Major (9) Unknown	<u>O</u>	(5) Forward of center of the rear wheels (rear axle) left side (6) Forward of center of the rear wheels (rear axle) right side (7) Over center of the rear wheels (rear axle) (8) Other (specify): (9) Unknown
32.	Origin of Fire (0) No fire (1) Vehicle exterior (front, side, back, top) (2) Exhaust system (3) Fuel tank (and other fuel retention system parts) (4) Engine compartment (5) Cargo/trunk compartment (6) Instrument panel (7) Passenger compartment area (8) Other location (specify): (9) Unknown Type of Fuel Tank-1 Type of Fuel Tank-2 (0) No fuel tank (electrical vehicle) (1) Metallic (2) Non-metallic (9) Unknown	10	36. Fuel Tank-1 Filler Cap Location 37. Fuel Tank-2 Filler Cap Location (0) No fuel tank (1) On back plane (2) Aft of center of the rear wheels (rear axle) on left side plane (3) Aft of center of the rear wheels (rear axle) on right side plane (4) Forward of center of the rear wheels (rear axle) on left side plane (5) Forward of center of the rear wheels (rear axle) on right side plane (6) Over the center of the rear wheels (rear axle) on left side plane (7) Over the center of the rear wheels (rear axle) on right side plane (8) Other (specify): (9) Unknown 38. Fuel Tank-1 Damage 39. Fuel Tank-2 Damage (0) No fuel tank (1) No damage to fuel tank (2) Deformed, no seam failure (3) Deformed, with a seam failure (4) Punctured (5) Lacerated (ripped)
			(6) Abraded (scraped) (7) Filler neck separation from the fuel tank (8) Other damage (specify): (9) Unknown

40.	Location of Fuel System-1 Leakage	44. Is This Vehicle Equipped With More Than Two Fuel Tanks?
41.	Location of Fuel System-2 Leakage	(0) No (one or two tanks only)
	(0) No fuel tank (1) No fuel leakage Primary Area Of Leakage (2) Tank (3) Filler neck (4) Cap (5) Lines/pump/filter (6) Vent/emission recovery (8) Other (specify):	Yes - More Than Two Tanks (1) Yes no damage to any tank or filler cap and no fuel system leakage (2) Yes no damage to any tank or filler cap but there is fuel system leakage (specify leakage location): (3) Yes damage to an additional tank or filler cap and there is fuel system leakage (specify the following): Type of tank Tank location
42.	Fuel Type-1	Filler cap location Tank damage Location of leakage
43.	Fuel Type-2 O O	Type of fuel
	Single Fuel Type (00) No fuel tank	
	 (01) Gasoline (02) Diesel (03) CNG (Compressed Natural Gas) (04) LPG (Liquid Petroleum Gas) also known as Propane (05) LNG (Liquid Natural Gas) (06) Methanol (M100 or M85) (07) Ethanol (E100 or E85) (08) Other (Hydrogen or others) (specify): 	COMMENTS
	Electric Powered or Electric/Solar Powered Vehicles (10) Lead Acid Battery (11) Nickel-Iron Battery (12) Nickel-Cadmium Battery (13) Sodium Metal Chloride Battery (14) Sodium Sulfur Battery (18) Other (Specify): (98) Other Hybrid (specify):	
	(99) Unknown fuel type	
**		WAS NOT TOWED AND WAS NOT AN AOPS *** OT COMPLETE THE INTERIOR VEHICLE FORM.

National Highway Traffic Safety

INTERIOR VEHICLE FORM NATIONAL ACCIDENT SAMPLING SYSTEM

Administration	CRASHWORTHINESS DATA SYSTE
11 🗸	GLAZING
1. Primary Sampling Unit Number 48	Glazing Damage from Impact Forces
2. Case Number - Stratum 2 2 1 K	15. WS <u>2</u> 16. LF <u>0</u> 17. RF <u>0</u> 18. LR <u>0</u> 19. RR <u>0</u>
3. Vehicle Number	20. BL 6 21. Roof 8 22. Other 0
INTEGRITY	
4. Passenger Compartment Integrity (00) No integrity loss Yes, Integrity Was Lost Through (01) Windshield (02) Door (side) (03) Door/hatch (back door) (04) Roof	 (0) No glazing damage from impact forces (2) Glazing in place and cracked from impact forces (3) Glazing in place and holed from impact forces (4) Glazing out-of-place (cracked or not) and not holed from impact forces (5) Glazing out-of-place and holed from impact forces (6) Glazing disintegrated from impact forces (7) Glazing removed prior to accident (8) No glazing (9) Unknown if damaged
(05) Roof glass (06) Side window	
(07) Rear window (backlight)	Glazing Damage from Occupant Contact
108) Roof and roof glass (09) Windshield and door (side)	23. WS <u>2</u> 24. LF <u>O</u> 25. RF <u>O</u> 26. LR <u>O</u> 27. RR <u>O</u>
(10) Windshield and roof (11) Side and rear window (side window and backlight)	28. BL <u>()</u> 29. Roof <u>()</u> 30. Other <u>()</u>
(12) Windshield and side window	(0) No occupant contact to glazing or no glazing
(13) Door and side window(98) Other combination of above (specify):	(1) Glazing contacted by occupant but no glazing damage (2) Glazing in place and cracked by occupant contact
(99) Unknown	(3) Glazing in place and holed by occupant contact (4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact (5) Glazing out-of-place by occupant contact and holed by
Door, Tailgate or Hatch Opening	occupent contact (6) Glazing disintegrated by occupent contact
5. LF 6. RF ² 7. LR <u>O</u> 8. RR <u>O</u> 9. TG/H	(9) Unknown if contacted by occupant
(0) No door/gate/hatch (1) Door/gate/hatch remained closed and operational (2) Door/gate/hatch came open during collision (3) Door/gate/hatch jammed shut	If No Glazing Damage <i>And</i> No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As Ø Type of Window/Windshield Glazing
(8) Other (specify):	
(9) Unknown	31. WS 1 32. LF 0 33. RF 34. LR 0 35. RR 36. BL 8 37. Roof 38. Other 6
Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø 10. LF ○ 11. RF ○ 12. LR ○ 13. RR ○ 14. TG/H ○ (0) No door/gate/hatch or door not opened	(0) No glazing contact and no damage, or no glazing (1) AS-1 — Laminated (2) AS-2 — Tempered (3) AS-3 — Tempered-tinted (4) AS-14 — Glass/Plastic (8) Other (specify):
Door, Tailgate or Hatch Came Open During Collision	
(1) Door operational (no damage) (2) Latch/striker failure due to damage	Window Precrash Glazing Status
(3) Hinge failure due to damage	00 40 1 40 45 0 44 55 0 45 55 5
(4) Door structure failure due to damage	39. WS <u>1</u> 40. LF <u>0</u> 41. RF <u>0</u> 42. LR <u>0</u> 43. RR <u>0</u>
(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage	44. BL <u> </u>
(6) Latch/striker and hinge failure due to damage (8) Other failure (specify):	(0) No glazing contact and no damage, or no glazing (1)' Fixed (2) Closed
(9) Unknown	(3) Partially opened (4) Fully opened (9) Unknown

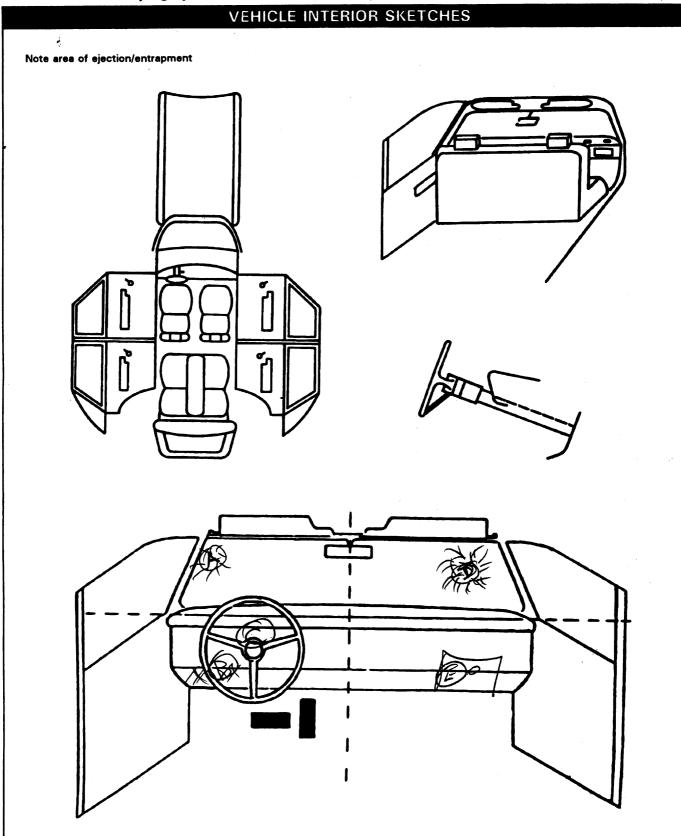


LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON VALUE	l Meas	urements Are In Centimeter INTRUDED VALUE =	INTRUSION	DOMINANT CRUSH DIRECTION
NF	TOE PAJ	139	_	12	18	LONG
	·			=		į.
LR	SEATBACK	80	_	69 =	//	
RCT) ī	80	_		20	
RQ) 1		_	58(?)=		
			_	=		/
			_	=		
			_	=		
			_	=		
			_	=		
			_	=		
			_	=		
				=		
			_	=	* -	
			***	=		

	OCCUPANT AREA INTRUSION							
Note	: If no intrusion	s, leave varia	bles IV47-IV	86 blank.	INTRUDING COMPONENT			
	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction	Interior Components (01) Steering assembly (02) Instrument panel left			
1st	47	48. <u>0</u> <u>5</u>	49.3	50.2	(03) Instrument panel center (04) Instrument panel right (05) Toe pan (06) A (A1/A2)-pillar			
2nd	51. 22	52	<u>533</u>	54. <u>2</u>	(07) B-pillar (08) C-pillar (09) D-pillar (10) Door panel (side)			
3rd	55	56. 19	57	58	(12) Roof (or convertible top) (13) Roof side rail (14) Windshield (15) Windshield header			
4th	59 . 9 9	60. 9 9	61	62. 9	(16) Window frame (17) Floor pan (includes sill) (18) Backlight header (19) Front seat back			
5th	63	64	65	66	(20) Second seat back (21) Third seat back (22) Fourth seat back (23) Fifth seat back			
6th	67	68	69	70	(24) Seat cushion (25) Back door/panel (e.g., tailgate) (26) Other interior component (specify):			
7th	71	72	_ 73	74	(27) Side panel - forward of the A (A2)-pillar (28) Side panel - rear of the A (A2)-pillar Exterior Components			
8th	75	76	_ 77	78	(30) Hood (31) Outside surface of this vehicle (specify): (32) Other exterior object in the environment			
9th	79	80	81	82	(specify):(33) Unknown exterior object (97) Catastrophic (98) Intrusion of unlisted component(s)			
10th	6 3	84	85	86	(specify):(99) Unknown			
Fro (TION OF INTR ont Seat (11) Left (12) Middle (13) Right	Fourth (41) (42)	Seat Left Middle Right		MAGNITUDE OF INTRUSION (1) ≥ 3 centimeters but < 8 centimeters (2) ≥ 8 centimeters but < 15 centimeters (3) ≥ 15 centimeters but < 30 centimeters (4) ≥ 30 centimeters but < 46 centimeters (5) ≥ 46 centimeters but < 61 centimeters			
(cond Seat 21) Left 22) Middle 23) Right	(98)	Catastroph Other encloarea (speci	osed	(6) ≥ 61 centimeters (7) Catastrophic (9) Unknown			
(ird Seat 31) Left 32) Middle 33) Right	(99)	Unknown		DOMINANT CRUSH DIRECTION (1) Vertical (2) Longitudinal (3) Lateral (7) Catastrophic (9) Unknown			

(All Measurements Are in Centimeters)						
COMPARISON VALUE	_	DAMAGE VALUE	=	DEFORMATION		
	-		=			
	_	NIX	=			
	_		=			
	_		=			

CTEEDING COLUMN	
87. Steering Column Type (1) Fixed column (2) Tilt column (3) Telescoping column (4) Tilt and telescoping column (8) Other column type (specify): (9) Unknown 88. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-94 CDS.	93. Location of Steering Rim/Spoke Deformation (00) No steering rim deformation Quarter Sections (01) Section A (02) Section B (03) Section C (04) Section D Half Sections (05) Upper half of rim/spoke (06) Lower half of rim/spoke (07) Left half of rim/spoke (08) Right half of rim/spoke (09) Complete steering wheel collapse (10) Undetermined location (99) Unknown
	INSTRUMENT PANEL
89. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-94 CDS.	94. Odometer Reading kilometers—Code to the nearest 1,000 kilometers (000) No odometer (001) Less than 1,500 kilometers (500) 499,500 kilometers or more
90. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-94 CDS.	(999) Unknown 162, 430 miles x 1.6093 = 261, 398 kilometers Source: V I
91. Blank (This variable is left blank so that numbering consistency can be maintained with the 1988-94 CDS.	95. Instrument Panel Damage from Occupant Contact? (0) No (1) Yes (9) Unknown
92. Steering Rim/Spoke Deformation Code actual measured deformation to the nearest centimeter (00) No steering rim deformation (01-14) Actual measured value in centimeters	96. Knee Bolsters Deformed from Occupant Contact? (0) No (1) Yes (8) Not present (9) Unknown
(15) 15 centimeters or more (98) Observed deformation cannot be measured (99) Unknown	97. Did Glove Compartment Door Open During Collision(s)? (0) No (1) Yes (8) Not present (9) Unknown



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

		PO	NTS OF OCC	CUPANT CONTA	CT		
Contact	Interior Component Contacted	Occupant No. If Known	Body	Supporting P		Evidence	Confidence Level of Contact Point
Α	W S		Homi:	SPIDERWE			
В	DASH	,	KNEE	Buster			1
С	5. W,		CHEST	COLUMN		<u></u>	1
D	12.5	1	Hene	SPIDERWE			+
E	GUNE BOY	2	KNEZ	DEFORM		DICE	1
F	GWE 120 y		12,002	DE 7 1.31(- 10		'
G							
Н							
' 			-				
К							
L							
M							
N							
		(CODES FOR INT	ERIOR COMPONENTS	;		
RONT			(23) Left B-pilla	ır	(46)	Other occupants (s	specify):
(01) Win (02) Mirr			(24) Other left	pillar (specify):	(47)	Interior loose object	***
(03) Sun				vindow glass or frame		Child safety seat (
	ering wheel rim ering wheel hub/spol	(e		vindow glass including re of the following:	(49)	Other interior object	ct (specify):
(06) Stee	ering wheel (combine		frame, wir	ndow sill, A (A1/A2)-pillar,	(,		
	odes 04 and 05) ering column, transm	nission	•	roof side rail. side object (specify):	ROOF		
	ctor lever, other atta		(20) Left side :		(50)		
	l on equipment (e.g., k, air conditioner)	CB, tape	(28) Left side v	vindow siii	(51) (52)		
	instrument panel ar		RIGHT SIDE			Roof right side rail	
	iter instrument panel nt instrument panel a		(30) Right side		(54)	Roof or convertible	top
	ve compartment doo			hardware or armrests hardware or armrest	FLOOR		
	e bolster			1/A2)-pillar	(56)	Floor (including to	pan)
	dshield including one	or more	(33) Right B-pill	•	(57)		•
of t	he following: front h	eader,	(34) Other right	t pillar (specify):		transmission lever,	including
	A1/A2)-pillar, instrum or, or steering assen	-	(35) Right side	window glass or frame	(58)	console Parking brake hand	ile
	only)	., .=		window glass including		Foot controls inclu	
(15) Win	dshield including one	e or more	_	re of the following:		brake	J. 8
	he following: front h			ndow sill, A (A1/A2)-pillar,			
A //	1/42)-niller instrum	ent nanel or	R niller or	roof side reil	REAR		

- frame, window sill, A (A1/A2)-pillar, B pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

A (A1/A2)-pillar, instrument panel, or

mirror (passenger side only)

(16) Driver side air bag compartment

(18) Windshield reinforced by exterior

excluding hardware or armrests

cover

LEFT SIDE

(17) Passenger side air bag compartment cover

object (specify):

(19) Other front object (specify):

(20) Left side interior surface,

(22) Left A (A1/A2)-pillar

(21) Left side hardware or armrest

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar attachment point
- (43) Other restraint system component (specify):_
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)

REAR

- (60) Backlight (rear window)
- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

CONFIDENCE LEVEL OF CONTACT POINT

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Left	Right				
F	Availability/Function	9	\subseteq				
Ŕ	Deployment		T				
S	Failure						

Air Bag System Availability/Function

- (0) Not equipped/not available
- (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):
- (3) Air bag not reinstalled
- (9) Unknown

Air Bag System Deployment

- (0) Not equipped/not available
- (1) Air bag deployed during accident (as a result of impact)
- (2) Air bag deployed inadvertently just prior to accident
- (3) Air bag deployed, accident sequence undetermined
- (4) Nondeployed
- (5) Unknown if deployed
- (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (9) Unknown

Are There Indications of Air Bag System Failure?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (9) Unknown

AUTOMATIC BELTS

		Left	Right
	Availability/Function	<u></u>	\bigcirc
F	Use	9	
Ŕ	Туре		
S T	Proper Use		
	Failure Modes		

Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of automatic belt system (specify):
- (9) Unknown

Automatic (Passive) Belt Failure Modes During Accident

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- 6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify):
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous

	page.	Left	Center	Right
	Availabiliav	21	Conte	// g //
F	Availability	4	<u> </u>	<u> </u>
Ì	Evidence of usage	00	00	00
R	Used in this crash?	0	Q	o
S	Proper Use	O	Ω	0
•	Failure Modes	0	Ō	Ö
c	Availability	3	3	3
S E	Evidence of usage	00	00	00
C	Used in this crash?	0	Ô	0
Ň	Proper Use	0	0	Q
D	Failure Modes	0	ð	9
_	Availability		4	
0 T H	Evidence of usage			
	Used in this crash?			
E	Proper Use			
R	Failure Modes			

- (O) None available
- Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):
- (9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (O1) Inoperable (specify):
- Shoulder belt
- (03)Lap belt
- (04)Lap and shoulder belt
- (05)Belt used - type unknown
- (08)Other belt used (specify):
- Shoulder belt used with child safety seat
- Lap belt used with child safety seat
- (14)Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

Proper Use of Manual (Active) Belts

- (0) None used or not available
- Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperly

- (3) Shoulder belt worn under arm(4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of manual belt system (specify):
- (9) Unknown

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

	O. W. D. O. S. E. T.	/ OF A T FIE				
Wi	CHILD SAFETY SEAT FIELD ASSESSMENT When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.					
00	ccupant Number					
1.	Type of Child Safety Seat					
2.	Child Safety Seat Orientation	\ /	,			
3.	Child Safety Seat Harness Usage	P/ ,	A			
4.	Child Safety Seat Shield Usage					
5.	Child Safety Seat Tether Usage					
6.	Child Safety Seat Make/Model	Specify B	Below for Each Child Safety Seat			
	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed for Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight	4. 5.	Child Safety Seat Harness Usage Child Safety Seat Tether Usage Note: Options Below Are Used for Variables 3-5. (00) No child safety seat Not Designed with Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if child safety seat used Child Safety Seat Make/Model (Specify make/model and occupant number)			
	(21) Rear facing(22) Forward facing(28) Other orientation (specify):					

(29) Unknown orientation

(99) Unknown if child safety seat used

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F	Head Restraint Type/Damage	3	0	3
I R	Seat Type	02	00	02
S	Seat Performance		0	l
i 	Seat Orientation		0	1
S	Head Restraint Type/Damage	0	0	0
E C	Seat Type	97	07	07
0	Seat Performance	3	3	3
D	Seat Orientation			1
т	Head Restraint Type/Damage			
H	Seat Type			
R	Seat Performance			
υ 	Seat Orientation			
0	Head Restraint Type/Damage)	
Ť	Seat Type			
E	Seat Performance			
R	Seat Orientation			

Head	Res	traint	Type/Damage	by	Occupant	at	This
Occur	oant	Positi	on				

- (0) No head restraints
- (1)
- Integral no damage Integral damaged during accident (2)
- (3) Adjustable no damage
- (4) Adjustable damaged during accident
- (5)
- Add-on no damage Add-on damaged during accident (6)
- (8) Other Specify):
- (9) Unknown

Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat
- (01)Bucket
- (02)Bucket with folding back
- (03) Bench
- (04)Bench with separate back cushions
- Bench with folding back(s) (05)
- (06) Split bench with separate back cushions

 $\mathcal{IOP}_{\mathcal{R}}$

- (07)Split bench with folding back(s)
- (08)Pedestal (i.e., column supported)
- (09)Other seat type (specify):
- (10)Box mounted seat (i.e., van type)
- (99) Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify:
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT **CONTACT PATTERN)**

Complete the following if the resear in the vehicle. Code the appropria EJECTION No [] Yes [Describe indications of ejection and	cher has any indite data on the O	ccupant Assessmen	ant was eithe t Form.	er ejected from	or entrapped	
Occupant Number						
Ejection (Note on Vehicle Interior Sketch) Ejection Area						
Ejection Medium						
Medium Status						
Ejection (1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear	pickup, (9) Unknov Ejection Medi (1) Door/ha (2) Nonfixe (3) Fixed g	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown Ejection Medium (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):		(5) Integral structure (8) Other medium (specify): (9) Unknown Medium Status (Immediately Prior to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown		
ENTRAPMENT No 1 Yes Describe entrapment mechanism:	s []					
Component(s):						
(Note in vehicle interior diagram)		<u> </u>		·		



OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

National Highway Traffic Safety
Administration
NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number	OCCUPANT'S SEATING
	10. Occupant's Seat Position
2. Case Number - Stratum 2 2 2 7 K	Front Seat
3. Vehicle Number	(11) Left side (12) Middle
4. Occupant Number	(13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
OCCUPANT S CHARACTERISTICS	(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown 75 inches X 2.54 = 190.5 centimeters	(41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat
9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	 (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT					
12. Ejection (0) No ejection (1) Complete eject (2) Partial ejection (3) Ejection, unkno (9) Unknown		0	15. Medium Status (Immediately Prior To Impact) (O) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown		
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g (specify): (9) Unknown	., back of pickup, etc.)	0	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown		
14. Ejection Medium (0) No ejection (1) Door/hatch/tail() (2) Nonfixed roof s (3) Fixed glazing (4) Nonfixed glazin (5) Integral structu (8) Other medium (9) Unknown	structure g (specify): re	0			

RESTRAINT SYSTEM EVALUATION					
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed)	21. Air Bag System Availability/Function (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown				
(7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown 18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	22. Air Bag System Deployment (0) Not equipped/not available (1) Air bag deployed during accident (as a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown				
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used 19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts				
Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Other or automatic restraint (specify): (8) Restrained, type unknown (9) Police indicated "unknown"				
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):	(3) Folice illulcated Uliknown				

	HEAD RESTRAINT AN	D SEAT EVALUATION
at T(0) (1) (2) (3) (4) (5) (6) (8) (9) Seat (00) (01) (02) (03) (04) (05) (06) (07) (08) (09) (10)	Restraint Type/Damage by Occupant his Occupant Position No head restraints Integral—no damage Integral—damaged during accident Adjustable—no damage Adjustable—damaged during accident Add-on—no damage Add-on—damaged during accident Other (specify): Unknown Type (this Occupant Position) Occupant not seated or no seat Bucket Bucket with folding back Bench Bench with separate back cushions Bench with folding back(s) Split bench with separate back cushions Split bench with folding back(s) Pedestal (i.e., column supported) Other seat type (specify): Box mounted seat (i.e., van type) Unknown	27. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (specify): (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion (specify): (7) Combination of above (specify): (8) Other (specify): (9) Unknown

	СНІ	LD SAF	TY SEAT		
28.	Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CI Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used	<u>)</u> <u>0</u>	32. Child Sa 33. Child Sa Note: O Variable	afety Seat Harness Usage afety Seat Shield Usage afety Seat Tether Usage aptions below applicable to as OA31-OA33.	<u>00</u> <u>00</u>
	Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (03) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/V (11) Rear facing (12) Forward facing (13) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation (99) Unknown orientation		(00) Not Des (01) At ad (02) At (03) Cr ha (09) Ur ad (11) Ha (12) Ha (12) Ha (22) Ha (29) Ur	signed With Harness/Shield/Teleter market harness/shield/tethedded, not used fter market harness/shield/tethedded, not used stress/shield/tether added harness/shield/tethedded or used with Harness/Shield/Tether arness/shield/tether not used arness/shield/tether used harness/shield/tether used harness/shield/tether not used arness/shield/tether not used arness/shield/tether not used arness/shield/tether used harness/shield/tether used harness/shield/tether used harness/shield/tether used harness/shield/tether used harness/shield/tether harness/s	her used after market er used Shield/Tether

	INJURY CONSEQUENCES	38.	Working Days Lost 9 7
34.	Injury Severity (Police Rating)		Code the number of days (up through 60) that the occupant
	(0) O - No injury		lost from work due to the accident
	(1) C - Possible injury		(00) No working days lost (61) 61 days or more
	(2) B - Nonincapacitating injury		(62) Fatally injured
	(3) A - Incapacitating injury (4) K - Killed		(97) Not working prior to accident
	(5) U - Injury, severity unknown		(99) Unknown
	(6) Died prior to accident		
	(9) Unknown	SI	OP - GO TO VARIABLE 44 ON PAGE 7
		.,,	RIABLES 39 THROUGH 43 ARE
35.	Treatment - Mortality		MPLETED BY THE ZONE CENTER
	(0) No treatment	*********	
	(1) Fatal		0 ()
	(2) Fatal - ruled disease (specify):	39.	Time to Death
			Code number of hours from time of accident to time of death up through 24
	Nonfatal		hours. If time of death is greater than 24
	(3) Hospitalization		hours, code number of days. (Note: 1 day =
	(4) Transported and released (5) Treatment at scene - nontransported		31, 2 days = 32, n days = 30 +n up
	(6) Treatment later		through 30 days = 60) (00) Not fatal
	(8) Treatment - other (specify):		(96) Fatal - ruled disease
	(9) Unknown		(99) Unknown
	(3) Olikilowii		
36.	Type Of Medical Facility (for Initial Treatment)	40.	1st Medically Reported Cause of Death
00.	(0) Not treated at a medical facility	41.	2nd Medically Reported Cause of Death
	(1) Trauma center (2) Hospital	۱.,	2
	(3) Medical clinic	42.	3rd Medically Reported Cause of Death Code the Occupant Injury from line
	(4) Physician's office	l	number(s) for the medically reported
	(5) Treatment later at medical facility		injury(s) which reportedly contributed to
	(8) Other (specify):		this occupant's death
	(9) Unknown	ļ	(00) Not fatal or no additional causes (96) Mode of death given but specific
			injuries are not linked to cause
27	Hannital State		of death. (specify):
37.	Hospital Stay (00) Not Hospitalized		(97) Other result (includes fatal ruled
	Code the number of days (up through 60)		disease) (specify):
	that the occupant stayed in hospital.		
	(61) 61 days or more (99) Unknown		(99) Unknown
			Number of Board, 11 11 1
		43.	Number of Recorded Injuries for This Occupant
			Code the actual number of
			injuries recorded for this occupant.
			(00) No recorded injuries
			(97) Injured, details unknown (99) Unknown if injured
			(30) Similaria ii iijaraa
		Ì	

44	AUTOMATIC BELT SYSTEM Automatic (Passive) Belt System Availability/	48.	. Automatic (Passive) Belt Failure Modes Ouring Accident					
44.	Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown		(0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):					
	Non-functional(4) Automatic belts destroyed or rendered inoperative(9) Unknown		(6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify): (9) Unknown					
45.	Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or		(6)					
	rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown	49.	Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward)					
	(9) Unknown		(8) Other (specify): (9) Unknown					
46.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown		(b) Chikhowh					
			Check the Primary Source Used In Determining Belt Use.					
47.	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat		 Not equipped/not available/destroyed or rendered inoperative Vehicle inspection Official injury data Driver/occupant interview Other (specify): 					
	Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen		[] Unknown if belt used					
	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):							
	(8) Other improper use of automatic belt system (specify): (9) Unknown							
	ARE ALL APPLICABLE MEDICAL RECORDS INCLUDED NO [] YES MY WITH INITIAL SUBMISSION?							
	UPDATE CANDIDATE? NO [✓] YES []							

BELT USE DETERMINATION STOP - VARIABLES 50 THROUGH 53 ARE COMPLETED BY THE ZONE CENTER 53. Primary Source of Belt Use Determination Not equipped/not available/destroyed or rendered inoperative Vehicle inspection TRAUMA DATA Official injury data (2) (3) Driver/occupant interview 50. Glasgow Coma Scale (GCS) Score (8) Other (specify): (at Medical Facility) (9) Unknown if belt used (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured 51. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given 52. Arterial Blood Gases (ABG) - HCO3 (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO3 (96) ABGs reported, HCO3 unknown (97) Injured, details unknown (99) Unknown if injured

Administration

U.S. Department of Transportation

National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

48

3. Vehicle Number

01

2. Case Number - Stratum

227K

4. Occupant Number

01

INJURY DATA

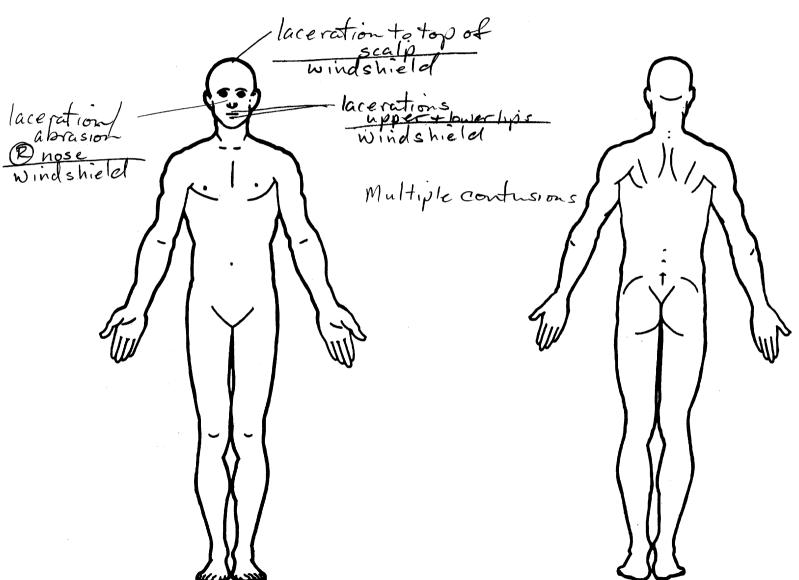
Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	Source of Injury Data	Body Region	Type o Anatom Structui	ic Anatomic	Level of	A.I.S. Severity	- / Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
1st	5.3	6. 2	7.9	8. 0 6	9. <i>O.</i> J	10	11. 4	12. <u>/</u>	13	14	15. <u>OQ</u>
2nd	16. 3	17. 🕘	18. 9	19. 🛕 💆	20. 🕦 🕽	21	22. 4	23. <u>O 1</u>	24	25	26. <u>O O</u>
3rd	27.	28	29. 9	30. <u>O</u>	31. <u>0</u> 2	32	33. J	34.	35	36	37. <u>O</u> O
4th	38. 2	39. 2	40. 9	41.06	42.02	43	44. 🔏	45. <u>0</u> /	46	47/	48. <u>0 0</u>
5th	4 9. <u>3</u>	50. <u>9</u>	51. 9	52. <u>()</u> <u>(</u>	53. <u>[] O</u>	54	55 . <u>9</u>	56. 9_7	57. 9	58	59. <u>99</u>
6th	60	61	62	63	64	65	66	67	68	69	70
7th	71	72	73	74	75	76	77	78	79	80	81
8th	82	83	84	85	86	87	88	89	90	91	92
9th	93	94	95	96	97	98	99	100	101 1	02 1	103
10th	104	105	106	107	108	109	110	111	112 1	13 1	114

OCCUPANT INJURY DATA											
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th											
12th	- .										o ¹ 21 1 9
13th			_								
14th		_				***************************************		-			
1 <u>5</u> th											
16th			· 	· — — — — — — — — — — — — — — — — — — —		·					
17th	_										
18th											
19th	* 2										
20th											igita (n. 1966) A din an di Biranda
21st											
22nd										erio di Maria Maria	
23rd											
24th											
25th											

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Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- (17)Passenger side air bag compartment cover (18) Windshield reinforced by exterior object
- (specify):
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify):
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42). Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component
- (specify):
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail (54) Roof or convertible top
- FLOOR
- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- Foot controls including parking (59) brake

REAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- (67) Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73)
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78)Other side protrusions (specify)
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify):
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- Certain (1)
- (2)Probable
- (3) Possible
- Unknown (9)

DIRECT/INDIRECT INJURY

- Direct contact injury
- (2) Indirect contact injury Noncontact injury
- 171 Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face
- (3) Neck Thorax
- (5) Abdomen
- (6) Spine Upper Extremity
- Lower Extremity (8) Unspecified
- Type of Anatomic Structure
- Whole Area
- (3) Nerves
- Organs (includes muscles/ ligaments)
- (5) Skeletal (includes joints)
- Head LOC Skin
- (9)

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion
- (04) Skin Contusion (06) Skin Laceration
- Skin Avulsion
- (10) Amputation Burn (20)
- Crush Degloving (30) (40)
- Injury NFS Trauma, other than mechanical

- (02) Length of LOC
- (04, 06, 08) Level of Consciousness
- (10) Concussion

- Cervical
- (04) Thoracic (06) Lumbar
- Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, OO is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- (2) Moderate injury
- Serious injury Severe injury
- (5) Critical injury Maximum (untreatable)
- Injured, unknown severity

Aspect

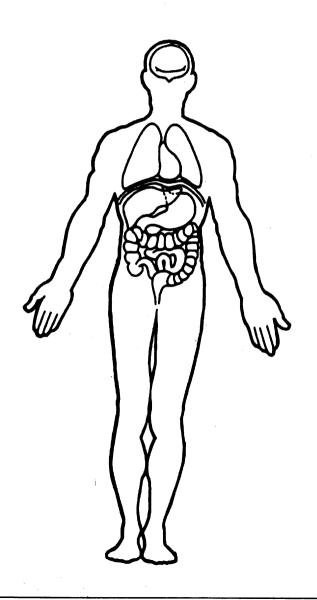
- Right
- (3) Bilateral Central
- (5) Anterior (6) Posterior
- (7) Superior
- (8) Inferior Unknown
- Whole region

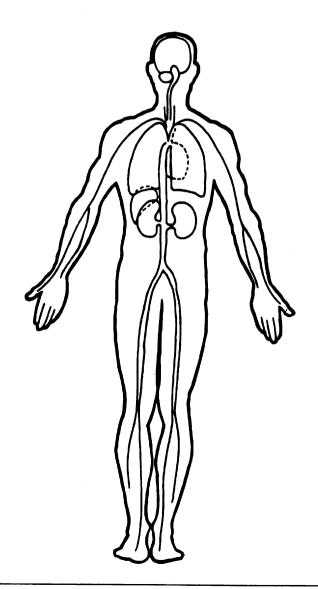
Page

OFFICIAL INJURY DATA - SKELETAL INJURIES Restrained? Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.) Blood Alcohol Level (mg/dl) BAL = ____ Glasgow Coma Scale Score GCSS = Units of Blood Given Units = **Arterial Blood** Gases HCO₃

OFFICIAL INJURY DATA —INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)







Form Approved

	SESSMENT FORM 0.M.B. No. 2127-002
National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTE CRASHWORTHINESS DATA SYSTE
1. Primary Sampling Unit Number 48	OCCUPANT'S SEATING
2. Case Number - Stratum 227 K	10. Occupant's Seat Position Front Seat
3. Vehicle Number	(11) Left side
4. Occupant Number O 2	(12) Middle (13) Right side
	(14) Other (specify):
OCCUPANT'S CHARACTERISTICS	(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month):	Second Seat (21) Left side (22) Middle (23) Right side
(97) 97 years and older	(24) Other (specify):
6. Occupant's Sex (1) Male (2) Female (9) Unknown 7. Occupant's Height Code actual height to the nearest	(25) On or in the lap of another occupant Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat (41) Left side (42) Middle (43) Right side
centimeter. (999) Unknown	(44) Other (specify):
72 inches X 2.54 = 182.8 centimeters	(97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture
9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

		EJECTION/E	NTRAPMENT
12.	Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	<u>Q</u>	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13.	Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, (specify):	<u>O</u> etc.)	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown
14.	Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	<u>O</u>	

RESTRAINT SYSTEM EVALUATION						
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt	21. Air Bag System Availability/Function (O) Not equipped/not available (1) Air bag Non-functional					
 (5) Belt available—type unknown Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) 	(2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown					
(8) Other belt (specify): (9) Unknown 18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt	22. Air Bag System Deployment (0) Not equipped/not available (1) Air bag deployed during accident (as a result of impact) (2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined (4) Nondeployed (5) Unknown if deployed (6) Air bag deployed as a result of a noncollision					
 (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify): (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used 	event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown 23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No (2) Yes (specify):					
19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts					
 Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown 	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Other or automatic restraint (specify): (8) Restrained, type unknown (9) Police indicated "unknown"					
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):						

14800	TIGI A	ccident Sampling System-Crashworthiness Data	System	n: Occupant Assessment Form Page	
		HEAD RESTRAINT AN	D SEA	TEVALUATION	
25.	at Th (0) (1) (2) (3) (4) (5) (6)	Restraint Type/Damage by Occupant his Occupant Position No head restraints Integral—no damage Integral—damaged during accident Adjustable—no damage Adjustable—damaged during accident Add-on—no damage Add-on—damaged during accident Other (specify):	(0 (1 (2 (3 (4 (5	at Performance (this Occupant Position) Occupant not seated or no seat No seat performance failure(s) Seat adjusters failed Seat back folding locks or "seat back" failed (specify): Seat track/anchors failed Deformed by impact of occupant Deformed by passenger compartment intrusion (specify):	
	(9)	Unknown		Combination of above (specify):	
26.	(00)	Type (this Occupant Position) Occupant not seated or no seat		Other (specify): Unknown	
	(01) (02) (03) (04) (05) (06) (07) (08) (09)	Bucket Bucket with folding back Bench Bench with separate back cushions Bench with folding back(s) Split bench with separate back cushions Split bench with folding back(s) Pedestal (i.e., column supported) Other seat type (specify): Box mounted seat (i.e., van type) Unknown			

28. Child Safety Seat Make/Model (OOO) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Bultin- child safety seat (997) Other make/model (specify): (998) Unknown make/model (specify): (999) Unknown make/model (specify): (999) Unknown if child safety seat used 29. Type of Child Safety Seat (O) No child safety seat (1) Infams seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat (specify): (8) Unknown if child safety seat used 30. Child Safety Seat Orientation (OO) No child safety seat used 30. Child Safety Seat Orientation (OO) No child safety seat (specify): (1) Rear facing (O2) Forward facing (O2) Forward facing (O2) Forward facing (O2) Forward facing (O3) Unknown orientation (O4) Unknown orientation (O5) Unknown orient		CHILD SA	FETY SEAT
(999) Unknown if child safety seat used Note: Options below applicable to Variables OA31-OA33. (00) No child safety seat 29. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Boster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat used (8) Unknown child safety seat used (9) Unknown if child safety seat used (10) No child safety seat orientation (00) No child safety seat (11) Rear facing (12) Forward facing (13) Child Safety Seat Orientation (specify): (14) Rear facing (15) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (13) Unknown orientation Unknown Design or Orientation For This Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (14) Unknown orientation Unknown Design or Orientation For This Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (24) Unknown orientation Unknown Design or Orientation For This Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (24) Unknown orientation Unknown orientation Unknown Design or Orientation For This Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (24) Unknown orientation	28.	(000) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	32. Child Safety Seat Shield Usage
(01) No child safety seat (11) Infant seat (22) Toddler seat (33) Convertible seat (44) Booster seat (75) Other type child safety seat (specify): (85) Unknown child safety seat used (87) Unknown if child safety seat used (88) Unknown if child safety seat used (89) Unknown if harness/shield/tether added or used (99) Unknown if harness/shield/tether added or used (99) Unknown if harness/shield/tether added or used (19) Unknown if harness/shield/tether added or used (19) Unknown if harness/shield/tether not used (11) Harness/shield/tether not used (12) Harness/shield/tether not used (13) Child safety seat (14) Harness/shield/tether not used (15) Unknown if harness/shield/tether used (16) Harness/shield/tether used (17) Unknown if harness/shield/tether used (18) Unknown if harness/shield/tether used (19) Unknown if harness/shield/tether (11) Harness/shield/tether used (19) Unknown if harness/shield/tether (11) Harness/shie	-		Variables OA31-OA33.
		(0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (13) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation	(01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used

	INJURY CONSEQUENCES	38. Working Days Lost
34	Injury Severity (Police Rating)	Code the number of days
		(up through 60) that the occupant lost from work due to the accident
	(0) O - No injury	(00) No working days lost
	(1) C - Possible injury (2) B - Nonincapacitating injury	(61) 61 days or more
	(3) A - Incapacitating injury	(62) Fatally injured (97) Not working prior to accident
	(4) K - Killed	(99) Unknown
	(5) U - Injury, severity unknown (6) Died prior to accident	
	(9) Unknown	STOP - GO TO VARIABLE 44 ON PAGE 7
		MARIAN FO ON TURNING AN ARE
35.	Treatment - Mortality 3	VARIABLES 39 THROUGH 43 ARE COMPLETED BY THE ZONE CENTER
	(0) No treatment	
	(1) Fatal (2) Fatal - ruled disease (specify):	20 Finance Depart
	(2) Tatal - Tuleu disease (specify).	39. Time to Death Code number of hours from time of
		accident to time of death up through 24
	Nonfatal (3) Hospitalization	hours. If time of death is greater than 24
	(4) Transported and released	hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up
	(5) Treatment at scene - nontransported	through 30 days = 60)
	(6) Treatment later (8) Treatment - other (specify):	(00) Not fatal
	(6) Treatment - Other (specify).	(96) Fatal - ruled disease (99) Unknown
	(9) Unknown	(55) GIRIOWII
		40. 1et Madically Reported Cause of Back
36.	Type Of Medical Facility (for Initial Treatment)	40. 1st Medically Reported Cause of Death
	(0) Not treated at a medical facility	41. 2nd Medically Reported Cause of Death <u>()</u>
	(1) Trauma center (2) Hospital	42. 3rd Medically Reported Cause of Death
	(3) Medical clinic	Code the Occupant Injury from line
	(4) Physician's office (5) Treatment later at medical facility	number(s) for the medically reported
	(8) Other (specify):	injury(s) which reportedly contributed to this occupant's death
		(00) Not fatal or no additional causes
	(9) Unknown	(96) Mode of death given but specific
		injuries are not linked to cause of death. (specify):
37.	Hospital Stay	
	(00) Not Hospitalized Code the number of days (up through 60)	(97) Other result (includes fatal ruled
	that the occupant stayed in hospital.	disease) (specify):
	(61) 61 days or more	(99) Unknown
	(99) Unknown	
		43. Number of Recorded Injuries for
		This Occupant
		Code the actual number of injuries recorded for this occupant.
		(00) No recorded injuries
		(97) Injured, details unknown
		(99) Unknown if injured

		_	
	AUTOMATIC BELT SYSTEM	48	3. Automatic (Passive) Belt Failure Modes
44.	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown	-	During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown		(6) Broken retractor(7) Combination of above (specify):(8) Other automatic belt failure (specify):
45.	Automatic (Passive) Belt System Use		(9) Unknown
	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	49	9. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
46.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system	-	(9) Unknown
	(9) Unknown		Check the Primary Source Used In Determining Belt Use.
47.	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown		Not equipped/not available/destroyed or rendered inoperative Vehicle inspection Official injury data Driver/occupant interview Other (specify): Unknown if belt used
	ARE ALL APPLICABLE MEDICAL RECOWITH INITIAL SUBMISSION?	RDS	S INCLUDED NO [] YES [X]
	UPDATE CANDIDATE?		NO [X] YES []

STOP - VARIABLES TO THROUGH KS ARE	BELT USE DETERMINATION
STOP - VARIABLES 50 THROUGH 53 ARE COMPLETED BY THE ZONE CENTER	53. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed
TRAUMA DATA	or rendered inoperative (1) Vehicle inspection
50. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility	(2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used
(02) No GCS score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured	
51. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given	
52. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured	

Form Approved
O.M.B. No. 2127-0021

National Highway Traffic Safety Administration OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

48

3. Vehicle Number

01

2. Case Number - Stratum

227K

4. Occupant Number

02

INJURY DATA

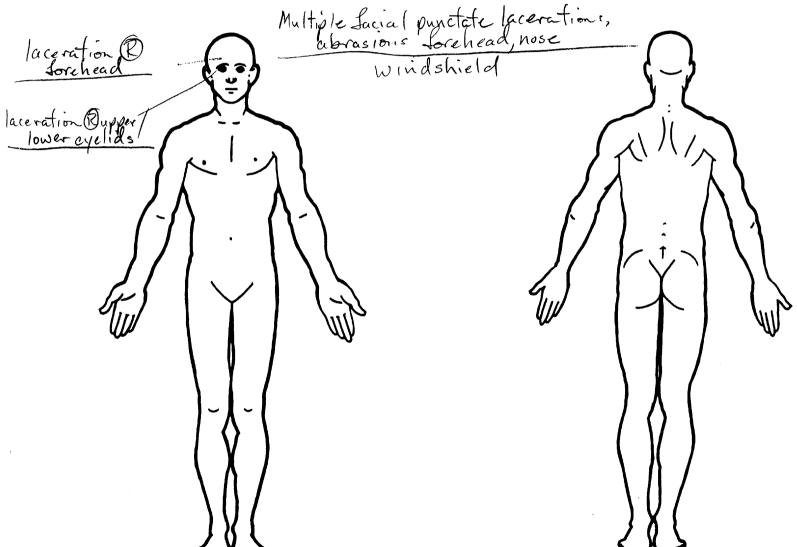
Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	Source of Injury Data	Body Region	Type of Anatomic Structure	c Anatomic	Level of	A.I.S. Severity	- ⁄ Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect	Occupant Area Intrusion Number
1st	5. 2	6	7.6	8. <u>0</u> 2	9. <u>Q</u> <u>Q</u>	10. 2	11	12. <u>O</u> <u>I</u>	13. 2	14	15. <u>Q</u> Q
2nd	16. 2	17. 2	18.9	19. <u>06</u>	20.02	21	22. 7	23. 01	24	25	26. <u>O O</u>
3rd	27	28. 2	29.9	30.02	31. <u>D</u> <u>2</u>	32	33	34. <u>0</u> /	35	36	37. <u>O O</u>
4th	38. 🗘	39. 2	40.9	41. <u>B</u> J	42. <u>0</u> <u>2</u>	43	44.4	45. <u>0 1</u>	46	47	48 <u>00</u>
5th	49. 귍	50. 🗘	51.9	52. <u>7</u> 6	53. 🔵 💆	54	55	56	57	58	59. <u>O</u>
6th	60	61	62	63	64	65	66	67	68	69	70
7th	71	72	73	74	75	76	77	78	79	80	81
8th	82	83	84	85	86	87	88	89	90	91	92
9th	93	94	95	96	97	98	99	100	101 1	02 1	03
10th	104	105	106 1	07	108	109	110	111	112 1	13 1	14

				OCC	UPANT I	NJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure		A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th						. — . . — .				·	
12th			_								
13th							·	. 		-	
14th	_	_					_		, **		
15th	_	_	_							:	
16th	_	_	_	·			·				
17th											
.18th	_		. <u> </u>					· — — · · ·			. -
19th											
20th											
21st		——									
22nd	<u> </u>	· ——								-	
23rd											
. 24th	 -										
25th				_ 							

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

All from windshield



SOURCE OF INJURY DATA

OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- Driver side air bag compartment cover
- (17) Passenger side air bag compartment cover
- (18) Windshield reinforced by exterior object (specify):
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- Other right pillar (specify):
- Right side window glass or frame
- Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify):
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking

REAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (66) Outside hardware (e.g., outside mirror, antenna)
- Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (74)Hood ornament
- Windshield, roof rail, A-pillar
- Side surface
- Side mirrors
- Other side protrusions (specify) (78)
- Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- Other noncontact injury source (92) (specify):
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- (2) Probable
- Possible (3)
- Unknown

DIRECT/INDIRECT INJURY

- Direct contact injury
- (2)Indirect contact injury (3) Noncontact injury
- (7)Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face Neck
- (3) Thorax Abdomen
- (6) Spine
- **Upper Extremity**
- (8) Lower Extremity Unspecified

Type of Anatomic Structure

- Whole Area
- Vessels
- (3) Nerves Organs (includes muscles/
- (5) Skeletal (includes joints)
- Head LOC
- (9) Skin

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion
- (04) Skin Contusion (06) Skin Laceration
- Skin Avulsion
- (10) Amputation Burn (20)
- Crush
- Degloving Injury NFS 1401
- Trauma, other than mechanical

- Head LOC (02) Length of LOC (04, 06, 08) Level of Consciousness

- Cervical (04) Thoracic (06) Lumbar
- Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- Moderate injury
- (3) Serious injury Severe injury
- (5)Critical injury
 - Maximum (untreatable) Injured, unknown severity

Aspect

- Right
- Bilateral
- Central Anterior
- Posterior Superior
- (8) Inferior Unknown
- Whole region

PSU NUMBER

CASE NUMBER

VEHICLE NUMBER

OCCUPANT NUMBER

02

OCCUPANT INJURY FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

[]	ENTIRE FORM		
,		•	
[4]	PAGE NUMBER (S)	3	

National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

	OCCUPANT RELATED	24 Pollover
16.	Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown	24. Rollover (0) No rollover (no overturning) **Rollover (primarily about the longitudinal axis)* (1) Rollover, 1 quarter turn only (2) Rollover, 2 quarter turns (3) Rollover, 3 quarter turns
17.	Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle (97) 97 or more (99) Unknown	(4) Rollover, 4 or more quarter turns (specify): ———————————————————————————————————
18.	Number of Occupant Forms Submitted <u>O</u> 2	(9) Rollover (overturn), details unknown
	VEHICLE WEIGHT ITEMS	OVERRIDE/UNDERRIDE (THIS VEHICLE)
19.	Vehicle Curb Weight	25. Front Override/Underride (this Vehicle) 26. Rear Override/Underride (this Vehicle)
	(045) Less than 450 kilograms (610) 6,100 kilograms or more (999) Unknown	(0) No override/underride, or not an end-to-end impact
20.	$\frac{2,6 \ 48 \text{ lbs } \times .4536 = 1,20 \text{ kgs}}{\text{Source:}}$ Vehicle Cargo Weight $0, 0 0$	Override (see specific CDC) (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify):
	Code weight to nearest 10 kilograms. (000) Less than 5 kilograms (450) 4,500 kilograms or more (999) Unknown	Underride (see specific CDC) (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):
21.	Towed Trailing Unit (0) No towed unit	(7) Medium/heavy truck or bus override (9) Unknown
	(1) Yes—towed trailing unit (9) Unknown	HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V
22.	Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown
23.	Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify):	27. Heading Angle For This Vehicle 208 28. Heading Angle For Other Vehicle 090
l	(9) Unknown	

Cate- gory	Contigur-	ACCIDENT TYPES (Includes Intent)
	A Right Roadside Departure	DRIVE OFF CONTROL/ AVOID COLLISION SPECIFICS UNKNOWN
Single Driver	B Left Roadside Departure	DRIVE OFF CONTROL/ AVOID COLLISION SPECIFICS SPECIFICS UNKNOWN
- .	C Forward Impact	PARKED VEN. STA. OBJECT PEDESTRIAN/ END SPECIFICS SPECIFICS UNKNOWN
ueij Átan	D Rear-End	20 22 24 25 28 29 (EACH • 32) (EACH • 33) STOPPED SLOWER DECEL. 31 SPECIFICS OTHER UNKNOWN
II. Sane Trafficway Sane Direction	E Forward Impact	CONTROL/ TRACTION LOSS 35 37 38 40 40 41 IEACH • 42) IEACH • 43 IEACH • 42) IEACH • 43 AVOID COLLISION WITH VEH. AVOID COLLISION WITH OBJECT OTHER UNKNOWN
	F Sideswipe Angle	44 45 (EACH · 48) (EACH · 49) SPECIFICS OTHER SPECIFICS UNKNOWN
ay.	G Head-On	51 (EACH • 82) (EACH • 83) SPECIFICS SPECIFICS UNKNOWN
Saine Trafficway Oppiwite Direction	H Forward Impact	CONTROL/ TRACTION LOSS WITH VEH. CONTROL (EACH • 62)(EACH • 62)(EACH • 62) CONTROL (EACH • 62) CO
Ξ	1. Sideswipe! Angle	(EACH • 65) (EACH • 67) SPECIFICS SPECIFICS UNKNOWN LATERAL MOVE OTHER
Change Trafficway Vehicle Turning	J. Turn Across Path	HNITIAL OPPOSITE INITIAL SAME DIRECTIONS SPECIFICS OTHER UNKNOWN
IV. Change Trafficw Vehicle Turning	K. Turn Into Path	TURN INTO SAME DIRECTION TURN INTO OPPOSITE DIRECTIONS OTHER UNKNOWN
V Intersecting Paths (Vehicle Damage)	L. Straight Paths	(EACH • 90) (EACH • 91) SPECIFICS SPECIFICS UNKNOWN OTHER
VI Miscel- lancous	M. Backing Etc.	SACKING VEH.

Page 5

OTHER DATA	61. Rollover Initiation Object Contacted
56. Driver's Zip Code	<u> </u>
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires (2) Side plane
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify): (9) Unknown	(3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown 63. Direction of Initial Roll (0) No rollover (1) Roll right - primarily about the longitudinal axis
58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance (7) Fire truck or car	 (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction PRECRASH DATA
(8) Other (specify):	1.0
(9) Unknown	64. Pre-Event Movement (Prior to
ROLLOVER DATA If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0. If GV24 = 9, then GV59-GV63 must equal 9. 59. Rollover Initiation Type (0) No rollover	(01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane (05) Passing or overtaking another vehicle (06) Disabled or parked in travel lane (07) Leaving a parking position
(1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify):	(08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position) (13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event (97) Other (specify):
60. Location of Rollover Initiation	(98) No driver present (99) Unknown
 (0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown 	

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover	(57) Fence
(01-30) — Vehicle Number	(58) Wall
	(59) Building
Noncollision	(60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(33) Jackknife	(62) Fire hydrant
	(63) Curb
Collision With Fixed Object	(64) Bridge
(41) Tree (≤ 10 cm in diameter)	(68) Other fixed object (specify):
(42) Tree (> 10 cm in diameter)	, , , , , , , , , , , , , , , , , , ,
(43) Shrubbery or bush	(69) Unknown fixed object
(44) Embankment	,,
	Collision with Nonfixed Object
(45) Breakaway pole or post (any diameter)	(71) Motor vehicle not in-transport
	(76) Animal
Nonbreakaway Pole or Post	(77) Train
(50) Pole or post (≤ 10 cm in diameter)	(78) Trailer, disconnected in transport
(51) Pole or post (> 10 cm but \leq 30 cm in	(79) Object fell from vehicle in-transport
diameter)	(88) Other nonfixed object (specify):
(52) Pole or post (> 30 cm in diameter)	, .,
(53) Pole or post (diameter unknown)	(89) Unknown nonfixed object
(54) Concrete traffic barrier	(98) Other event (specify):
(55) Impact attenuator	(oo) out to the topology
(56) Other traffic barrier (includes guardrail)	(99) Unknown event or object
(specify):	•



U.S. Department of Transportation

National Highway Traffic Safety Administration

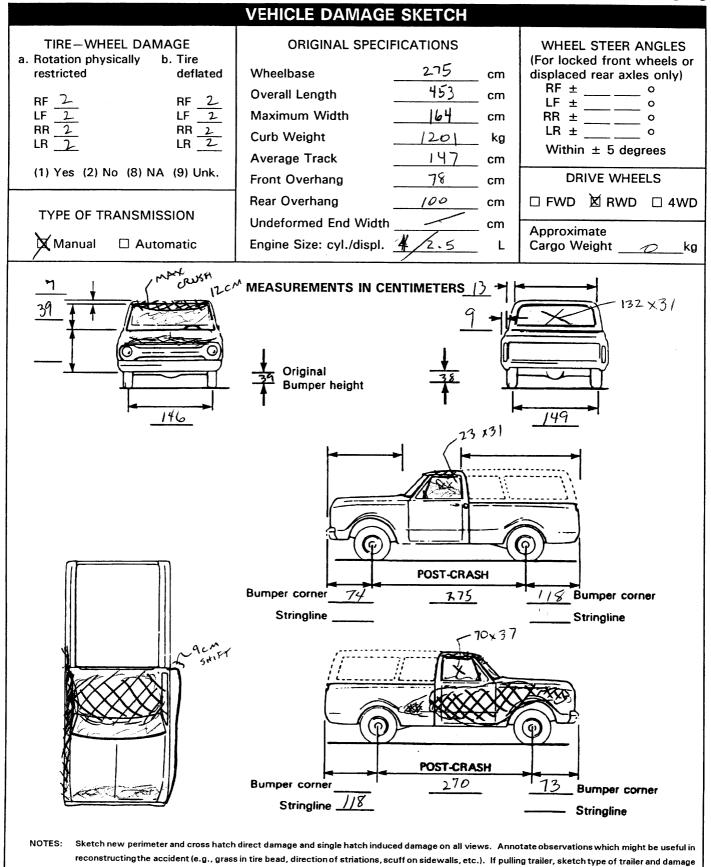
EXTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

	y Sampling Jumber - Str			48 27K	3.	Vehicle	e Numbe	er			<u>.</u> C	2	
VEHICLE IDENTIFICATION													
VIN $1GTB514E7K2$ Model Year $\frac{389}{}$													
Vehicle Make (specify): GM C Vehicle Model (specify): \$\times 1.5													
				LO	CATO	R				_			
	end of the o			t to the vehi	cle long	gitudina	center	line or b	umper o	corner f	or end i	mpacts	
	npact No.			of Direct Da	mage			Lo	ocation	of Field	L		
1		STYNET	3 46cm 1	Sources of	RR An	ιÉ	SAM	Ą					
·													
				SH PROFIL									
S N ir F ti S	ill, etc.) and Measure and Measure C1 mpacts. Tree space v he individualide taper, et	documento C6 from la C location. Received	djustments of the vector on the vector of th	C-measureme (e.g., free sp rehicle diagra o passenger ne distance to may include e for each C ecessary to	eace). am the side in between the followessu	location front or the ba lowing: rement	of max rear imposed seline a bumper and max	imum c pacts ar nd the d lead, b ximum	rush. nd rear t priginal l umper t	o front	in side	aken at	
Specific Impact	Plane of Ir		Direct D Width	Damage Max	Field	C,	C,	C ₃	C ₄	C ₆	C ₆	±D	
Number	C-Measure		(CDC)	Crush	L	·							
1	M18 3	105	278	<u>c3</u>	278	0	18	27	16	6	0	+185	460
											 		
											 	<u> </u>	
			·										
	}			l		1	1			1		1	İ

ORIGINAL SPECIFICATIONS WORK SHEET

Wheelbase	108.3 in	ches x 2.54	= _	275 cm
Overall Length	178.2 in	ches x 2.54	-	4 <u>5</u> 3 cm
Maximum Width	<u>64.7</u> in			164 cm
Curb Weight	2, 6 48 (4) po	unds x .4536	=	kg
Average Track	in	ches x 2.54	= _	cm
Front Overhang	in	ches x 2.54	= _	cm
Rear Overhang	in	ches x 2.54	=	cm
Undeformed End Width	in	ches x 2.54	= '	cm
Engine Size: cyl./displ.	cc	x .001	=	L
	CI	x .0164	=	L



Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

received on the back of this page.

	CDC W	ORKSHEE"	Т	
	CODES FOR OB	SECT CONT	ACTED	
(01-30)) — Vehicle Number		Fence	
		• •	Wall	
Noncol			Building	
	Overturn - rollover		Ditch or culvert	
	Fire or explosion		Ground	
	Jackknife		Fire hydrant	
(34)	Other intraunit damage (specify):		Curb	
			Bridge	
	Noncollision injury	(68)	Other fixed object (specify):	
(38)	Other noncollision (specify):			
		(69)	Unknown fixed object	
(39)	Noncollision — details unknown			
		Collisio	n with Nonfixed Object	
Collisio	n With Fixed Object	(71)	Motor vehicle not in-transport	
(41)	Tree (≤ 10 cm in diameter)	(72)	Pedestrian	
(42)	Tree (> 10 cm in diameter)	(73)	Cyclist or cycle	
(43)	Shrubbery or bush		Other nonmotorist or conveyance	
	Embankment			
		(75)	Vehicle occupant	
(45)	Breakaway pole or post (any diameter)		Animal	
, , , ,	Transfer of poor (any ordinate)		Train	
Nonbre	akaway Pole or Post		Trailer, disconnected in transport	
	Pole or post (≤ 10 cm in diameter)		Object fell from vehicle in-transport	
	Pole or post (> 10 cm but ≤ 30 cm in		Other nonfixed object (specify):	
(0.7	diameter)	(00)	Caron monitived object (apochty).	
(52)	Pole or post (> 30 cm in diameter)	(89)	Unknown nonfixed object	
	Pole or post (diameter unknown)	(00)	Olkhown hormxed object	
(00)	Told of poor (diameter disknown)	(98)	Other event (specify):	
(54)	Concrete traffic barrier	(50)	Other event (specify).	
	Impact attenuator	(99)	Unknown event or object	
	Other traffic barrier (includes guardrail)	(55)	Onknown event of Object	
(30)	(amoniful)			
	(specify):			

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force (degrees)	Incremental Value of Shift	(3) Deformation Location	(4) Specific Longitudinal or Lateral Location	(5) Specific Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
101	01	<u> 50</u>	00	R	D	E	<u>w</u>	03
02	3 1	000	00	I	<u>P</u>	$\overline{\lambda}$	<u>Q</u>	03
03	03	000	00	9_	9	_2	9	9 9
					·			
							-	
					-		-	
								

Tradonal Accid	lent camping			ta Oystein. Exte		OIIII	raye .
		COLLISION	DEFORMA	TION CLAS	SIFICATIO	N	
HIGHEST (DELTA "V"		•				
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4.01	5. <u>0</u> <u>l</u>	6. 02 01	7. <u>R</u>	8. <u>D</u>	9. <u>E</u>	10. <u>W</u>	11. <u>03</u>
Second Hig	ghest Delta "V	n					
12. <u>0</u> <u>\(\lambda \)</u>	133	14. 0 0	15	16	17. <u>У</u>	18. <u>O</u>	19. <u>0</u> 3
		CRUS	H PROFILE	IN CENTIM	ETERS		
			nage described below. (ALL M				d
HIGHEST D	DELTA "V"						
20. L	21. 				C ₆	C ₆	22. ±D
278	000	018	<u>027</u>	<u>016</u>	06 0	<u>00</u> -	185
Second Hig	ghest Delta "V	m					
23. 	24. 				C ₆	C ₆	25. ±D
					— <u> </u>	=	- -
	s Documented Coded on The ed File?	1 (0	27. Researcher's Assessment of Vehicle Disposition (0) Not towed due to vehicle damage (1) Towed due to vehicle damage (9) Unknown				<u>275</u> ter
				108.	3 inches X 2.5	4 = 275	entimeters

29. Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? (0) No post manufacturer modifications (1) Yes - post manufacturer modifications (specify): (Include photograph of CERTIFICATION PLACARD in case report) (9) Unknown if vehicle is modified 30. Fire Occurrence (0) No fire	0	34. Fuel Tank-1 Location 35. Fuel Tank-2 Location (0) No fuel tank (1) Aft of center of the rear wheels (rear axle) centered (2) Aft of center of the rear wheels (rear axle) left side (3) Aft of center of the rear wheels (rear axle) right side (4) Forward of center of the rear wheels (rear axle) centered (5) Forward of center of the rear wheels (rear axle) left side (6) Forward of center of the rear wheels (rear
Yes, fire occurred (1) Minor (2) Major (9) Unknown		axle) right side (7) Over center of the rear wheels (rear axle) (8) Other (specify): (9) Unknown
31. Origin of Fire (0) No fire (1) Vehicle exterior (front, side, back, top) (2) Exhaust system (3) Fuel tank (and other fuel retention system parts) (4) Engine compartment (5) Cargo/trunk compartment (6) Instrument panel (7) Passenger compartment area (8) Other location (specify): (9) Unknown 32. Type of Fuel Tank-1 33. Type of Fuel Tank-2 (0) No fuel tank (electrical vehicle) (1) Metallic	<u>0</u>	36. Fuel Tank-1 Filler Cap Location 37. Fuel Tank-2 Filler Cap Location (0) No fuel tank (1) On back plane (2) Aft of center of the rear wheels (rear axle) on left side plane (3) Aft of center of the rear wheels (rear axle) on right side plane (4) Forward of center of the rear wheels (rear axle) on left side plane (5) Forward of center of the rear wheels (rear axle) on right side plane (6) Over the center of the rear wheels (rear axle) on left side plane (7) Over the center of the rear wheels (rear axle) on right side plane (8) Other (specify): (9) Unknown
(2) Non-metallic (9) Unknown		38. Fuel Tank-1 Damage 39. Fuel Tank-2 Damage (0) No fuel tank (1) No damage to fuel tank (2) Deformed, no seam failure (3) Deformed, with a seam failure (4) Punctured (5) Lacerated (ripped) (6) Abraded (scraped) (7) Filler neck separation from the fuel tank (8) Other damage (specify):

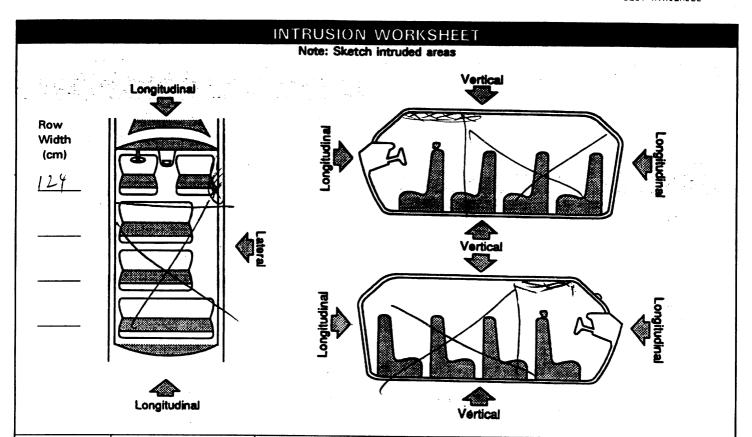
40.	Loca	ation of Fuel System-1 Leakage		44. Is T	his Vehicle Equipped With More Than	
		ation of Fuel System-2 Leakage	0	Two	Fuel Tanks? No (one or two tanks only)	_
- ' '	(0)	No fuel tank		(0,	Two folic of two talks offly	
	,	No fuel leakage		Yes	- More Than Two Tanks	
				(1)	Yes no damage to any tank or filler	
l	_	nary Area Of Leakage		(0)	cap and no fuel system leakage	
İ	(2) (3)	Tank Filler neck		(2)	Yes no damage to any tank or filler cap but there is fuel system leakage	
		Cap			(specify leakage location):	
		Lines/pump/filter			topoony tourings tooution,	
		Vent/emission recovery		(3)	Yes damage to an additional tank or	
	(8)	Other (specify):			filler cap and there is fuel system leakage	
					(specify the following):	
	(9)	Unknown			Type of tank	
					Tank location	
142	Fuel	Type-1	0.1		Filler cap location	
72.	ı ucı	турет			Tank damage Location of leakage	
43.	Fuel	Type-2	00		Type of fuel	
				(9)	Type of fuelUnknown if more than two tanks	
•		lle Fuel Type				
	, ,	No fuel tank				
		Gasoline Diesel			COMMENTS	
}		CNG (Compressed Natural Gas)			COMMITTEE	
l		LPG (Liquid Petroleum Gas) also				
		known as Propane				
		LNG (Liquid Natural Gas)				
		Methanol (M100 or M85)				
		Ethanol (E100 or E85)		<u> </u>		
	(00)	Other (Hydrogen or others) (specify)	1.			
l		tric Powered or Electric/Solar				
1		vered Vehicles				
		Lead Acid Battery Nickel-Iron Battery				
1		Nickel-Cadmium Battery				
1		Sodium Metal Chloride Battery				
1		Sodium Sulfur Battery		<u> </u>		
	(18)	Other (Specify):				
İ	1081	Other Hybrid (specify):				
	(30)	Other Hybrid (specify).				
	(99)	Unknown fuel type				
<u> </u>						
**	* S1	TOP: IF THE CDS APPLICABLE \	/EHICLE V	VAS NO	T TOWED AND WAS NOT AN AOPS *	* *
	(I.E.	., $GV09 = 0$ OR 9 AND $GV36 = 0$	D), DO NO	T COMP	PLETE THE INTERIOR VEHICLE FORM.	
		en en en en en en en en en en en en en e				
l						

National Highway Traffic Safety

INTERIOR VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Administration INTERIOR VE	CRASHWORTHINESS DATA SYSTE
1. Primary Sampling Unit Number 48	GLAZING
	Glazing Damage from Impact Forces
2. Case Number - Stratum 2 2 2 1 K	15. WS $\stackrel{?}{\sim}$ 16. LF $\stackrel{1}{\circ}$ 17. RF $\stackrel{\checkmark}{\circ}$ 18. LR $\stackrel{\mathcal{E}}{\circ}$ 19. RR $\stackrel{\mathcal{E}}{\circ}$
3. Vehicle Number $\underline{\circ} \ \underline{\mathcal{L}}$	20. BL 6 21. Roof 8 22. Other 8
INTEGRITY	
4. Passenger Compartment Integrity 9 8 (00) No integrity loss	 (0) No glazing damage from impact forces (2) Glazing in place and cracked from impact forces (3) Glazing in place and holed from impact forces (4) Glazing out-of-place (cracked or not) and not holed from impact forces
Yes, Integrity Was Lost Through (O1) Windshield (O2) Door (side) (O3) Door/hatch (back door) (O4) Roof (O5) Roof glass	 (5) Glazing out-of-place and holed from impact forces (6) Glazing disintegrated from impact forces (7) Glazing removed prior to accident (8) No glazing (9) Unknown if damaged
)(06) Side window (07) Rear window (backlight)	Glazing Damage from Occupant Contact
(08) Roof and roof glass (09) Windshield and door (side)	23. WS 🕖 24. LF 💆 25. RF 🖉 26. LR 💆 27. RR 💆
(10) Windshield and roof(11) Side and rear window (side window and backlight)	28. BL <u>O</u> 29. Roof <u>O</u> 30. Other <u>O</u>
(12) Windshield and side window (13) Door and side window (188) Other combination of above (specify):	 (0) No occupant contact to glazing or no glazing (1) Glazing contacted by occupant but no glazing damage (2) Glazing in place and cracked by occupant contact (3) Glazing in place and holed by occupant contact (4) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
Door, Tailgate or Hatch Opening 5. LF 6. RF 3 7. LR 0 8. RR 0 9. TG/H 0	(5) Glazing out-of-place by occupant contact and holed by occupant contact (6) Glazing disintegrated by occupant contact (9) Unknown if contacted by occupant
(0) No door/gate/hatch (1) Door/gate/hatch remained closed and operational	If No Glazing Damage <i>And</i> No Occupant Contact or No Glazing, Then Code IV31 Through IV46 As Ø
(2) Door/gate/hatch came open during collision	
(3) Door/gate/hatch jammed shut (8) Other (specify):	Type of Window/Windshield Glazing
	31. WS <u>\</u> 32. LF <u>\</u> 33. RF <u>\</u> 34. LR <u>\</u> 35. RR
(9) Unknown	36. BL 8 37. Roof <i>⊘</i> 38. Other ○
Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø 10. LF ○ 11. RF ○ 12. LR ○ 13. RR ○ 14. TG/H ○ (0) No door/gate/hatch or door not opened	(0) No glazing contact and no damage, or no glazing (1) AS-1 — Laminated (2) AS-2 — Tempered (3) AS-3 — Tempered-tinted (4) AS-14 — Glass/Plastic (8) Other (specify):
Door, Tailgate or Hatch Came Open During Collision	(5) Chillian
(1) Door operational (no damage)	Window Precrash Glazing Status
(2) Latch/striker failure due to damage	-
(3) Hinge failure due to damage (4) Door structure failure due to damage	39. WS <u> </u>
(5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage	44. BL <u> </u>
(6) Latch/striker and hinge failure due to damage (8) Other failure (specify):	(0) No glazing contact and no damage, or no glazing (1)' Fixed (2) Closed
(9) Unknown	(3) Partially opened (4) Fully opened (9) Unknown



LOCATION OF INTRUSION	INTRUDED COMPONENT	(AI COMPARISON VALUE	Meas	urements Are In Cer INTRUDED VALUE	ntimeters) =	INTRUSION	DOMINANT CRUSH DIRECTION
RF	DOOR	66	_	62	=	4	LAT
	SILL	69	_	60	=	9 3):
	A-PILLAR	67	_	6)	=	6	
	KICK PANEZ	67		61	=	6	
-	B-PILLAR	65	_	63	=	۷	• /
RF	ROOF	103	. –	92	=	11 0	Vex
	ROOF SING RAIS	104	_	92	=	12 0	\
	Roser		_		=		
	WS I HOWDEN	101		91	=	103	
	W5	95	_	87	=	8 3	
ŕc	1200 F-	103	_	94	=	9 6	
	W5 HELXDEX	101	_	94	=	7 (9)	
	W5	95		88	=	7 0	
LF	ROOF	103		94	=	9 (7)	
	WS Hoasen	101	_	94	=	7	

Document no more than the 15 most severe intrusions

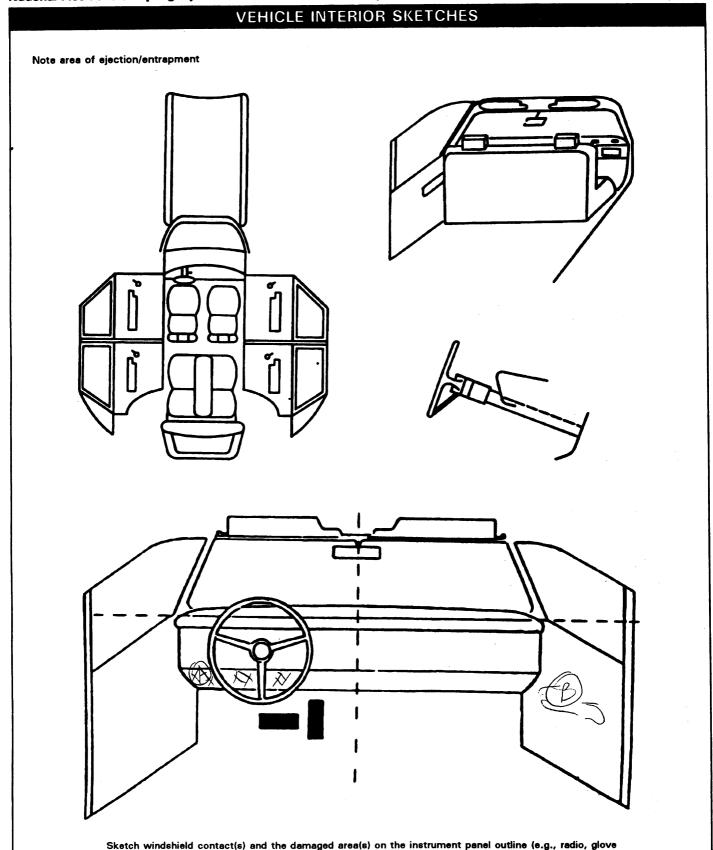
6

10 0

		OCCU	EA INTRUSION	
Note:	If no intrusion	s, leave variables IV47-IV	86 blank.	INTRUDING COMPONENT
	Location of Intrusion	Intruding Magnitude Component of Intrusion	Dominant Crush Direction	Interior Components (01) Steering assembly (02) Instrument panel left
1st	473	48. 3 49. 2	50	(03) Instrument panel center (04) Instrument panel right (05) Toe pan (06) A (A1/A2)-pillar (07) B-pillar
2nd	51. <u> </u>	52. <u>/</u> <u>\lambda</u> 53. <u>\lambda</u>	54	(08) C-pillar (09) D-pillar (10) Door panel (side) (12) Roof (or convertible top)
3rd	55. 1 3	56. <u> </u> 5 57. <u>2</u>	58	(12) Roof (of convertible top) (13) Roof side rail (14) Windshield (15) Windshield header (16) Window frame
4th	59	60. 1 3 61. 2	62	(17) Floor pan (includes sill) (18) Backlight header (19) Front seat back (20) Second seat back
5th	63 . 1 3	64. 1 7 65. 2	66.3	(21) Third seat back (22) Fourth seat back (23) Fifth seat back
6th	67. <u> </u> <u>\(\lambda \)</u>	68. <u>1</u> 2 69.2	70\	(24) Seat cushion (25) Back door/panel (e.g., tailgate) (26) Other interior component (specify):
7th	71\	72. <u>\</u> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	74	(27) Side panel - forward of the A (A2)-pillar (28) Side panel - rear of the A (A2)-pillar
8th	75 . 1 3	76. <u> </u>	78	(30) Hood (31) Outside surface of this vehicle (specify):
9th	79. 1 2	80. 1 5 81. 1	82	(32) Other exterior object in the environment (specify): (33) Unknown exterior object (97) Catastrophic (98) Intrusion of unlisted component(s)
10th	83 . 1 2	84.	86	(specify):(99) Unknown
Front Seat Fourth Seat (11) Left (41) Left (12) Middle (42) Middle (13) Right (43) Right Second Seat (97) Catastrophic (21) Left (98) Other enclosed (22) Middle area (specify)		osed	MAGNITUDE OF INTRUSION (1) ≥ 3 centimeters but < 8 centimeters (2) ≥ 8 centimeters but < 15 centimeters (3) ≥ 15 centimeters but < 30 centimeters (4) ≥ 30 centimeters but < 46 centimeters (5) ≥ 46 centimeters but < 61 centimeters (6) ≥ 61 centimeters (7) Catastrophic (9) Unknown	
(23) Right (99) Unknown Third Seat (31) Left (32) Middle (33) Right			DOMINANT CRUSH DIRECTION (1) Vertical (2) Longitudinal (3) Lateral (7) Catastrophic (9) Unknown	

	(All Messuren	nents Are in Centimets	MS)	
OMPARISON VALUE -	- DAN	MAGE VALUE	=	DEFORMATION
-	_	- 1	=	
-	_	1/7	=	
-	_	7	=	
-	_		=	

93. Location of Steering Rim/Spoke Deformation (00) No steering rim deformation Quarter Sections (01) Section A (02) Section B (03) Section C (04) Section D Half Sections (05) Upper half of rim/spoke (06) Lower half of rim/spoke (07) Left half of rim/spoke (08) Right half of rim/spoke
(09) Complete steering wheel collapse (10) Undetermined location (99) Unknown
94. Odometer Reading kilometers—Code to the nearest 1,000 kilometers (000) No odometer (001) Less than 1,500 kilometers (500) 499,500 kilometers or more (999) Unknown
103,481 miles x 1.6093 = 166,531 kilometers Source: V = 95. Instrument Panel Damage from
Occupant Contact? (0) No (1) Yes (9) Unknown
Occupant Contact? (0) No (1) Yes (8) Not present (9) Unknown
97. Did Glove Compartment Door Open During Collision(s)? (0) No (1) Yes (8) Not present (9) Unknown



compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

POINTS OF OCCUPANT CONTACT								
Cont	Interior Component act Contacted	Occupant No. If Known	F	Body Region If (nown	Supporting Ph		vidence	Confidence Level of Contact Point
А	DASH	1		インス を	BUSTERS			
В	DeoR	2			SCUFT			2
С	Deok		 		3.071			
D		1	+			· · · · · · · · · · · · · · · · · · ·		
E			+					
F			_					
G								
			-					
<u>н</u>		 						
<u> </u>			-					· · · · · · · · · · · · · · · · · · ·
J								
K								
L		ļ	<u> </u>					
M								
N								
(03) (04) (05)	(01) Windshield (02) Mirror (03) Sunvisor (04) Steering wheel rim (05) Steering wheel hub/spoke (06) Steering wheel (combination		(25) Left side window glass or frame (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar,		(47) Interior loose object (48) Child safety seat (section (49) Other interior object	oecify):		
(08) (09)	of codes 04 and 05) Steering column, transiselector lever, other att Add on equipment (e.g deck, air conditioner) Left instrument panel a	achment ., CB, tape and below	B-pillar, or roof side rail. (27) Other left side object (specify) (28) Left side window sill RIGHT SIDE		side object (specify):	(51) (52) (53)	Front header Rear header Roof left side rail Roof right side rail Roof or convertible	t on
	Center instrument panel Right instrument panel		(30)	•	hardware or armrests	(54)	Roof of convertible	тор
	Glove compartment do	or	(31) (32)	-	hardware or armrest (1/A2)-pillar	FLOOR (56)	Floor (including toe	nen)
	(13) Knee bolster (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel,		(33) (34)	Right B-pil Other righ	llar t pillar (specify):	(57)	Floor or console mo transmission lever, i console	unted including
(15)	mirror, or steering asseside only) Windshield including or of the following: front l	ne or more header,	(35) (36)	Right side one or mo frame, wir	window glass or frame window glass including re of the following: ndow sill, A (A1/A2)-pillar,	(59)	Parking brake handl Foot controls includ brake	
(16)	A (A1/A2)-pillar, instrur mirror (passenger side of Driver side air bag com cover	only)	(37) (38)	Other righ	roof side reil. t side object (specify):	(60) (61) (62)	Backlight (rear wind Backlight storage ra Other rear object (s	ck, door, etc.
(17)	Passenger side air bag			•		,/		
(18)	compartment cover Windshield reinforced b		INTERIO (40)	OR Seat, back	c support			
	object (specify):Other front object (specific specific speci		(41) (42)	Belt restra Belt restra attachmen	int webbing/buckle int B-piller nt point		CONFIDENCE LEV	
	Left side interior surfacexcluding hardware or	ermrests	(44)	(specify):_ Head restr Air bag (u	raint system component raint system use codes "16" and "17"		(1) Certain (2) Probable (3) Possible	
(21)	Left side hardware or a	rmrest		for injuries	s sustained from air bag	ı	(9) Unknown	

for injuries sustained from air bag

compartment covers)

(9) Unknown

(21) Left side hardware or armrest

(22) Left A (A1/A2)-pillar

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Left	Right
F R S	Availability/Function	Ģ	\bigcirc
	Deployment		
	Failure		

Air Bag System Availability/Function

- (0) Not equipped/not available
- (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):
- (3) Air bag not reinstalled
- (9) Unknown

Air Bag System Deployment

- (O) Not equipped/not available
- (1) Air bag deployed during accident (as a result of impact)
- (2) Air bag deployed inadvertently just prior to accident
- (3) Air bag deployed, accident sequence undetermined
- (4) Nondeployed
- (5) Unknown if deployed
- (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- (9) Unknown

Are There Indications of Air Bag System Failure?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (9) Unknown

AUTOMATIC BELTS

		Left	Right
F I R S T	Availability/Function	\bigcirc	\bigcirc
	Use		
	Туре		
	Proper Use		
	Failure Modes		

Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of automatic belt system (specify):

(9) Unknown

Automatic (Passive) Belt Failure Modes During Accident

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify):
- (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Ocupant Assessment Form.

If a Child safety seat is present, encode the data on the back of this page.

If the vehicle has automatic restraints available, encode the appropriate data on the back of the previous

		Left	Center	Right
F	Availability	4	3	4
	Evidence of usage	04	00	04
R	Used in this crash?	4	0	4
S	Proper Use	1	0	1
	Failure Modes		0	,
c	Availability			
S	Evidence of usage			
C	Used in this crash?			
020	Proper Use			
	Failure Modes			
O T H E R	Availability			
	Evidence of usage			
	Used in this crash?			
	Proper Use			
	Failure Modes			

- (0) None available
- (1)Belt removed/destroyed
- Shoulder belt
- (3)Lap belt
- Lap and shoulder belt
- (5) Belt available type unknown

Integral Belt Partially Destroyed

- Shoulder belt (lap belt
- destroyed/removed) (7) Lap belt (shoulder belt
- destroyed/removed) (8) Other belt (specify):
- (9) Unknown

Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (O1) Inoperable (specify):
- (02) Shoulder belt (03) Lap belt
- (04)Lap and shoulder belt
- Belt used type unknown (05)
- (08) Other belt used (specify):
- Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14)Lap and shoulder belt used with child safety seat
- Belt used with child safety seat -
- type unknown Other belt used with child safety seat (specify):
- (99) Unknown if belt used

Proper Use of Manual (Active) Belts

- (0) None used or not available(1) Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperly

- (3) Shoulder belt worn under arm
- (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of manual belt system (specify):
- (9) Unknown

Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

	ETY SEAT FIELD ASSESSMENT
When a child safety seat is present enter the occupant's number using the codes li	the occupant's number in the first row and complete the column below isted below. Complete a column for each child safety seat present.
Occupant Number	
Type of Child Safety Seat	
Child Safety Seat Orientation	M/
Child Safety Seat Harness Usage	
Child Safety Seat Shield Usage	
5. Child Safety Seat Tether Usage	
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat
1. Type of Child Safety Seat	3. Child Safety Seat Harness Usage
(0) No child safety seat (1) Infant seat	4. Child Safety Seat Shield Usage
(2) Toddler seat	E Child Cofety Cost Tether House
(3) Convertible seat	 Child Safety Seat Tether Usage Note: Options Below Are Used for Variables 3-5.
(4) Booster seat	
(7) Other type child safety seat (spec	cify): (00) No child safety seat
(8) Unknown child safety seat type (9) Unknown if child safety seat used	Not Designed with Harness/Shield/Tether (01) After market harness/shield/tether added, not used
2. Child Safety Seat Orientation	(02) After market harness/shield/tether used (03) Child safety seat used, but no after market
(00) No child safety seat	harness/shield/tether added
Designed for Rear Facing for This Age/Weight (01) Rear facing	(09) Unknown if harness/shield/tether added or used
(02) Forward facing	Designed With Harness/Shield/Tether
(08) Other orientation (specify):	(11) Harness/shield/tether not used
100	(12) Harness/shield/tether used
(09) Unknown orientation	(19) Unknown if harness/shield/tether used
Designed for Forward Facing for This Age/Weight	Unknown If Designed With Harness/Shield/Tethe (21) Harness/shield/tether not used
(11) Rear facing	(22) Harness/shield/tether used
(12) Forward facing	(29) Unknown if harness/shield/tether used
(18) Other orientation (specify):	(00) 11 1
(19) Unknown orientation	(99) Unknown if child safety seat used
	6. Child Safety Seat Make/Model
Unknown Design or Orientation For T	
Age/Weight, or Unknown Age/Weight	l .
(21) Rear facing (22) Forward facing	
(28) Other orientation (specify):	
(29) Unknown orientation	
(99) Unknown if child safety seat use	ed

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
F - 0	Head Restraint Type/Damage	0	0	0
	Seat Type	05	05	05
RS	Seat Performance		1	1
T	Seat Orientation	/	1	. /
S	Head Restraint Type/Damage			
E C	Seat Type			
O N	Seat Performance			
D	Seat Orientation			
T	Head Restraint Type/Damage			
Ĥ	Seat Type	,		
R D	Seat Performance			-/
	Seat Orientation			
OT H E R	Head Restraint Type/Damage			
	Seat Type			
	Seat Performance			
	Seat Orientation			

Head Restraint Type/Damage by Occupant at This **Occupant Position**

- (0) No head restraints
- (1)
- Integral no damage Integral damaged during accident
- Adjustable no damage (3)
- (4)Adjustable - damaged during accident
- (5)
- Add-on no damage Add-on damaged during accident (6)
- Other Specify):
- (9) Unknown

Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Other seat type (specify):
- (10) Box mounted seat (i.e., van type)
- (99) Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed specify:
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify):
- (9) Unknown

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT **CONTACT PATTERN)**

EJECTION/ENTRAPMENT DATA Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.					
EJECTION No Yes [] Describe indications of ejection and body parts involved in partial ejection(s):					
Occupant Number					
Ejection					
(Note on Vehicle Interior Sketch) Ejection Area					
Ejection Medium					
Medium Status					
Ejection (1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	(5) Integral structure (8) Other medium (specify): (9) Unknown Medium Status (Immediately Prior			
Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear	Ejection Medium (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):	to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown			
ENTRAPMENT No [Yes Describe entrapment mechanism:	:[]				
Component(s):					
(Note in vehicle interior diagram)					



Form Approved

J.S. Department of Transportation	DESSMENT FURIM 0.M.B. No. 2127-002 NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
1. Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum 2227 K	10. Occupant's Seat Position Front Seat
3. Vehicle Number	(11) Left side (12) Middle
4. Occupant Number	(13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):(15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex (1) Male (2) Female (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown 1 2 inches X 2.54 = 182.8 centimeters	Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area
mones x 2.54 = continuetors	(98) Other seat (specify):(99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999)Unknown	11. Occupant's Posture (0) Normal posture
9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify):

	EJECTION/ENTRAPMENT							
12.	Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	0	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown					
13.	Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc. (specify):	.)	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown					
14.	Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown							

RESTRAINT SYS	TEM EVALUATION
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt	21. Air Bag System Availability/Function (0) Not equipped/not available (1) Air bag Non-functional
(4) Lap and shoulder belt (5) Belt available—type unknown	(2) Air bag disconnected (specify):
Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed)	(3) Air bag not reinstalled (9) Unknown
(8) Other belt (specify):	22. Air Bag System Deployment (0) Not equipped/not available
(9) Unknown	(1) Air bag deployed during accident (as a result of impact)
18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed	(2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined
(01) Inoperative (specify): (02) Shoulder belt	(4) Nondeployed (5) Unknown if deployed
(03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	(6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown
 (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat 	23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No
(specify): (99) Unknown if belt used	(2) Yes (specify):
19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	(9) Unknown Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts
Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):	24. Police Reported Restraint Use (0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified
(8) Other improper use of manual belt system (specify):	(6) Child safety seat (7) Other or automatic restraint (specify):
(9) Unknown	(8) Restrained, type unknown (9) Police indicated "unknown"
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify):	(a) Folice indicated unknown
(9) Unknown	

	HEAD RESTRAINT AN	D SEAT EVALUATION
at T((0) (1) (2) (3) (4) (5) (6) (8) (9) Seat (00) (01) (02) (03) (04) (05) (06) (07) (08) (09) (10)	Restraint Type/Damage by Occupant his Occupant Position No head restraints Integral—no damage Integral—damaged during accident Adjustable—no damage Adjustable—damaged during accident Add-on—no damage Add-on—damaged during accident Other (specify): Unknown Type (this Occupant Position) Occupant not seated or no seat Bucket Bucket with folding back Bench Bench with separate back cushions Bench with folding back(s) Split bench with separate back cushions Split bench with folding back(s) Pedestal (i.e., column supported) Other seat type (specify): Box mounted seat (i.e., van type) Unknown	27. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (specify): (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion (specify): (7) Combination of above (specify): (8) Other (specify): (9) Unknown

CHILD SAF	ETY SEAT
28. Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS CDS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	31. Child Safety Seat Harness Usage 32. Child Safety Seat Shield Usage 33. Child Safety Seat Tether Usage
(998) Unknown make/model (999) Unknown if child safety seat used	Note: Options below applicable to Variables OA31-OA33. (00) No child safety seat
29. Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used	Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
30. Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify):	Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used
(19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used	

	INJURY CONSEQUENCES	38. Working Days Lost 9 7
34.	Injury Severity (Police Rating)	Code the number of days (up through 60) that the occupant
	(0) O - No injury	lost from work due to the accident
	(1) C - Possible injury	(00) No working days lost
	(2) B - Nonincapacitating injury	(61) 61 days or more
	(3) A - Incapacitating injury	(62) Fatally injured
	(4) K - Killed	(97) Not working prior to accident
	(5) U - Injury, severity unknown	(99) Unknown
	(6) Died prior to accident	
	(9) Unknown	STOP - GO TO VARIABLE 44 ON PAGE 7
l	/	VARIABLES 39 THROUGH 43 ARE
35.	Treatment - Mortality 6	COMPLETED BY THE ZONE CENTER
	(0) No treatment	
	(1) Fatal	
	(2) Fatal - ruled disease (specify):	39. Time to Death
		Code number of hours from time of
	Nonfatal	accident to time of death up through 24 hours. If time of death is greater than 24
	(3) Hospitalization	hours, code number of days. (Note: 1 day =
	(4) Transported and released	31, 2 days = 32, n days = 30 + n up
	(5) Treatment at scene - nontransported	through 30 days = 60)
	(6) Treatment later	(00) Not fatal
	(8) Treatment - other (specify):	(96) Fatal - ruled disease
	(9) Unknown	(99) Unknown
	(3) Childwii	
	T 0/14 15 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	40. 1st Medically Reported Cause of Death
36.	Type Of Medical Facility (for Initial Treatment)	
	(0) Not treated at a medical facility(1) Trauma center	41. 2nd Medically Reported Cause of Death
	(2) Hospital	42 2-4 44 - 17 - 11 - 12 - 12 - 12 - 12 - 12 - 12
	(3) Medical clinic	42. 3rd Medically Reported Cause of Death Code the Occupant Injury from line
	(4) Physician's office	number(s) for the medically reported
	(5) Treatment later at medical facility	injury(s) which reportedly contributed to
	(8) Other (specify):	this occupant's death
	(0) 11 1	(00) Not fatal or no additional causes
	(9) Unknown	(96) Mode of death given but specific
		injuries are not linked to cause
37.	Hospital Stay	of death. (specify):
	(00) Not Hospitalized	(97) Other result (includes fatal ruled
	Code the number of days (up through 60)	disease) (specify):
	that the occupant stayed in hospital.	Cibaco, (openiy).
	(61) 61 days or more	(99) Unknown
	(99) Unknown	
		42 Norther of Broad at Link Co.
		43. Number of Recorded Injuries for
		This Occupant Code the actual number of
		injuries recorded for this occupant.
		(00) No recorded injuries
		(97) Injured, details unknown
		(99) Unknown if injured

	AUTOMATIC BELT SYSTEM		48.	Automatic (Passive) Belt Failure Modes
44.	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative	<u>)</u>	70.	During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
45.	(9) Unknown Automatic (Passive) Belt System Use	,		(9) Unknown
	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown	-	49.	Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
46.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (3) Helicolum)		(9) Unknown
	(9) Unknown			Check the Primary Source Used In Determining Belt Use.
47.	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat	2		 Not equipped/not available/destroyed or rendered inoperative Vehicle inspection Official injury data Driver/occupant interview Other (specify):
	Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn			[] Unknown if belt used
	on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify):			
	(8) Other improper use of automatic belt system (specify):(9) Unknown			
	ARE ALL APPLICABLE MEDICAL RECO	ЭR	DS	INCLUDED NO MY YES []
	UPDATE CANDIDATE	?		NO [] YES X

STOP - VARIABLES SO THROUGH 53 ARE	BELT USE DETERMINATION					
STOP - VARIABLES 50 THROUGH 53 ARE COMPLETED BY THE ZONE CENTER	53. Primary Source of Belt Use Determination					
	(0) Not equipped/not available/destroyed or rendered inoperative					
TRAUMA DATA	(1) Vehicle inspection (2) Official injury data					
50. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured	(3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used					
51. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given						
52. Arterial Blood Gases (ABG) - HCO ₃						
(00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO3 (96) ABGs reported, HCO3 unknown (97) Injured, details unknown (99) Unknown if injured						

Administration

U.S. Department of Transportation National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

<u>48</u>

3. Vehicle Number

02

2. Case Number - Stratum

227K

4. Occupant Number

01

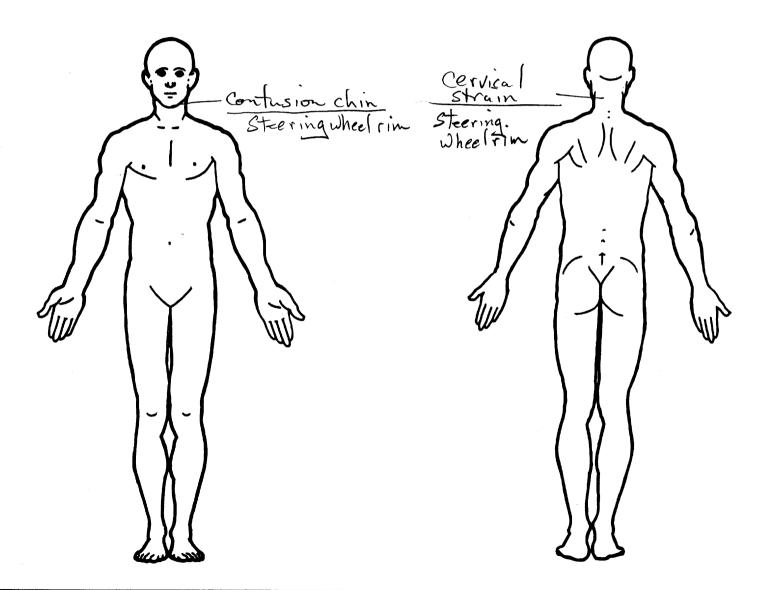
INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	Source of Injury Data	Body Region	Type of Anatomic Structure		90 Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	
1st	5.3	6. 6	7. 4	8. <u>0</u> 2	9. <u>7</u> 8	10	11.6	12. <u>0</u> <u>4</u>	13	14. 1	15. <u>O</u> O
2nd	16.3	17. 2	18.9 1	9. <u>0</u> 4	20.02	21	22. 💆	23. 04	24	25. 丄	26. <u>00</u>
3rd	27	28	29 3	30	31	32	33	34	35	36	37
4th	38	39	40	1 1	42	43	44	45	46	47	48
5th	49	50	51	52	53	54	55	56	57	58	59
6th	60	61	62	53	64	65	66	67	68	69	70
7th	71	72	73	74	75	76	77	78	79	80	81
8th	82	83	84 8	85	86	87	88	89	90	91	92
9th	93	94	95	96	97	98	99	100	101 1	02	103
10th	104	105	106 10	07	108	109	110	111	112 1	13	114

OCCUPANT INJURY DATA											
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure		A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th			_	·			<u> 111</u>				· <u></u>
12th											
13th		_							, 		·
14th			_			_	_				
15th											
16th	_		_		·			· · · · · · · · · · · · · · · · · · ·		* *********	
17th											
18th	_		. 				·				
19th	. —		, <u> </u>	<u> </u>	*						
20th		_	·		· · · · · · · · · · · · · · · · · · ·						
21st	 .			· · · · · · · · · · · · · · · · · · ·	· <u> </u>						· · · · · ·
22nd											
23rd											
24th	. <u></u>										
25th		·									

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



SOURCE OF INJURY DATA OFFICIAL

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lav coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (02) Mirror
- (03) Sunvisor
- (04) Steering wheel rim (05) Steering wheel hub/spoke
- (06) Steering wheel (combination
- of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- Passenger side air bag compartment cover (17)
- (18)Windshield reinforced by exterior object (specify):
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface, excluding hardware or armrests
- (21) Left side hardware or armrest
- (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- (31)Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- (33) Right B-pillar
- (34) Other right pillar (specify):
- (35) Right side window glass or frame
- Right side window glass including (36) one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify):
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

RFAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface
- (77) Side mirrors
- (78) Other side protrusions (specify)
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- Other exterior of other motor vehicle (82) (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- Other noncontact injury source (specify):
- (93) Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- Probable (2)
- Possible (3)
- Unknown (9)

DIRECT/INDIRECT INJURY

- Direct contact injury (1)
- Indirect contact injury (2) Noncontact injury (3)
- (7)Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face Neck
- (3) (4) Thorax
- (5) Abdomen (6)
- Spine (7) Upper Extremity
- 18 **Lower Extremity** Unspecified (9)
- Whole Area
- Vessels (2)(3)
- Organs (includes muscles/ (4)

Type of Anatomic Structure

- (5) Skeletal (includes joints)
- Head LOC
- (9) Skin

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion (04) Skin - Contusion Skin - Laceration
- Skin Avulsion
- (10) Amputation Burn
- (30) Crush
- (40) Degloving
- Injury NFS Trauma, other than mechanical

- Head LOC (02) Length of LOC
- (04, 06, 08) Level of Consciousness
- (10) Concussion

Cervical Thoracic (04)

(06) Lumbar

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- (2) Moderate injury
- Serious injury Severe injury
- (4) (5) Critical injury Maximum (untreatable)
- (7)Injured, unknown severity

Aspect

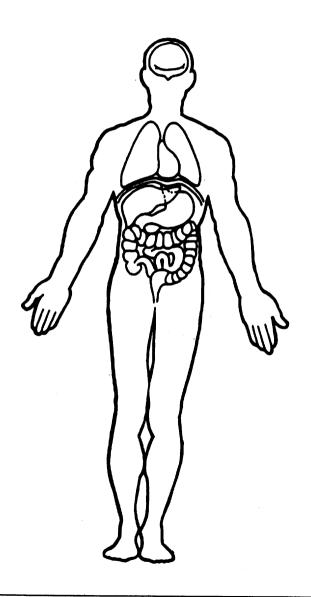
- Right
- Left Bilateral (2)
- (4) (5) Central Anterior
- (6) (7) Posterior Superior
- Interior 191 Unknown
- (0) Whole region

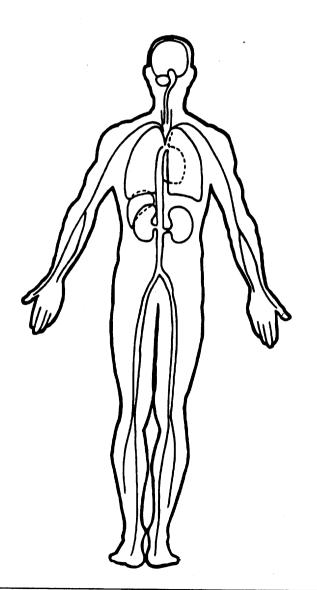
Page 3

	OFFICIAL INJURY DATA — SKELETAL INJURIES
Restrained? No Yes	Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)
Blood Alcohol Level (mg/dl) BAL =	bod)
Glasgow Coma Scale Score GCSS =	
Units of Blood Given Units =	
Arterial Blood Gases pH = PO ₂ =	
PCO ₂	

OFFICIAL INJURY DATA -INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)







U.S. Department of Transportation

OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM National Highway Traffic Safety Administration

1. Brimary Sampling Unit Number 4.8	OCCUPANT'S SEATING
1. Frimary Sampling Onic redinces	10. Occupant's Seat Position
2. Case Number - Stratum 2 2 7 K	Front Seat
3. Vehicle Number <u>O 2</u>	(11) Left side (12) Middle
4. Occupant Number	(13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
COOCIANT S CHAMACTEMETTES	
5. Occupant's Age	Second Seat (21) Left side
Code actual age at time of accident. (00) Less than one year old (specify by month):	(22) Middle
	(23) Right side
(97) 97 years and older (99) Unknown	(24) Other (specify):(25) On or in the lap of another occupant
(66)	71.10
	Third Seat (31) Left side
6. Occupant's Sex	(32) Middle
(1) Male (2) Female	(33) Right side (34) Other (specify):
(9) Unknown	(35) On or in the lap of another occupant
	Fourth Seat
	(41) Left side
7. Occupant's Height	(42) Middle
Code actual height to the nearest centimeter.	(43) Right side (44) Other (specify):
(999) Unknown	(45) On or in the lap of another occupant
7^{2} inches X 2.54 = 182.8 centimeters	(97) In or on unenclosed area
Z _ Hollos X 2.54 - Z _ Othanocore	(98) Other seat (specify):
	(99) Unknown
8. Occupant's Weight $\underline{\bigcirc} \underline{7} \underline{3}$	
Code actual weight to the nearest kilogram.	11. Occupant's Posture
(999)Unknown	(0) Normal posture
160 pounds X .4536 = 72.5 kilograms	Abnormal posture
/ 00 pounds X .4536 = kilograms	(1) Kneeling or standing on seat (2) Lying on or across seat
	(3) Kneeling, standing or sitting in front of seat
9. Occupant's Role	(4) Sitting sideways or turned to talk with another occupant or to look out a rear window
(1) Driver	(5) Sitting on a console (6) Lying back in a reclined seat position
(2) Passenger (9) Unknown	(7) Bracing with feet or hands on a surface in front
(a) Similarii	of seat (8) Other abnormal posture (specify):
	(9) Unknown
	(o) Circlesti

	EJECTION/EI	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown deg (9) Unknown		15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back (specify): (9) Unknown	of pickup, etc.)	16. Entrapment (NOTE: Entrapped means that part of the person was in the vehicle and mechanically restrained; jammed doors and immobilizing injuries by themselves are not sufficient to constitute entrapment.) (0) Not entrapped (1) Entrapped (9) Unknown
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structur (3) Fixed glazing (4) Nonfixed glazing (specify) (5) Integral structure (8) Other medium (specify) (9) Unknown	sify): 	

RESTRAINT SYST	TEM EVALUATION
17. Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt	21. Air Bag System Availability/Function (0) Not equipped/not available (1) Air bag Non-functional
(4) Lap and shoulder belt (5) Belt available—type unknown	(2) Air bag disconnected (specify):
Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed)	(3) Air bag not reinstalled (9) Unknown
(8) Other belt (specify):	22. Air Bag System Deployment (0) Not equipped/not available
(9) Unknown	(1) Air bag deployed during accident (as a result of impact)
18. Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed	(2) Air bag deployed inadvertently just prior to accident (3) Air bag deployed, accident sequence undetermined
(01) Inoperative (specify):	(4) Nondeployed
(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	(5) Unknown if deployed (6) Air bag deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (9) Unknown
(12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used	23. Are There Indications of Air Bag System Failure? (0) Not equipped/not available (1) No (2) Yes (specify):
,	(9) Unknown
19. Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	Note: See Variables 44 through 48 (Page 5) for Information on Automatic Belts
Belt Used Improperly (3) Shoulder belt worn under arm	24. Police Reported Restraint Use
 (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): 	(0) None used (1) Police did not indicate restraint use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified
(8) Other improper use of manual belt system (specify):	(6) Child safety seat (7) Other or automatic restraint (specify):
(9) Unknown	(8) Restrained, type unknown (9) Police indicated "unknown"
20. Manual (Active) Belt Failure Modes During Accident (0) No manual belt used (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify):	(a) Folice indicated uniknown
(9) Unknown	

HEAD RESTRAINT AN	ID SEAT EVALUATION
25. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 26. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Other seat type (specify): (10) Box mounted seat (i.e., van type) (99) Unknown	27. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (specify): (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion (specify): (7) Combination of above (specify): (8) Other (specify): (9) Unknown

C	HILD SAF	ETY	SEAT		
Child Safety Seat Make/Model (000) No child safety seat Applicable codes are found in your NASS Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify): (998) Unknown make/model (999) Unknown if child safety seat used	000 cds	32.	Child Safe Child Safe Note: Opt Variables	ety Seat Harness Usage ety Seat Shield Usage ety Seat Tether Usage tions below applicable OA31-OA33. child safety seat	<u> </u>
Type of Child Safety Seat (0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat used	<u>O</u>		(01) Afte adde (02) Afte (03) Child harn (09) Unkradde Designed (11) Harn (12) Harn	aned With Harness/Shieler market harness/shieled, not used er market harness/shield safety seat used, but ess/shield/tether addenown if harness/shield/Thess/shield/tether not uness/shield/tether used nown if harness/shield/tether used nown if harness/shield/tether	d/tether d/tether used t no after market d /tether
Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/We (01) Rear facing (02) Forward facing (08) Other orientation (specify): (09) Unknown orientation Designed For Forward Facing for This Age (11) Rear facing (12) Forward facing (18) Other orientation (specify): (19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (23) Other orientation (specify): (29) Unknown orientation (99) Unknown if child safety seat used			Unknown (21) Harn (22) Harn (29) Unkr	If Designed With Harmess/shield/tether not uness/shield/tether used nown if harness/shield nown if child safety se	ness/Shield/Tether used l /tether used

	INJURY CONSEQUENCES	38. Working Days Lost
34.	Injury Severity (Police Rating)	Code the number of days
		(up through 60) that the occupant lost from work due to the accident
1	(0) O - No injury	(00) No working days lost
	(1) C - Possible injury	(61) 61 days or more
	(2) B - Nonincapacitating injury	(62) Fatally injured
	(3) A - Incapacitating injury (4) K - Killed	(97) Not working prior to accident
	(5) U - Injury, severity unknown	(99) Unknown
	(6) Died prior to accident	
ļ	(9) Unknown	STOP - GO TO VARIABLE 44 ON PAGE 7
		STOP - GO TO VANIABLE 44 UN PAGE /
	,	VARIABLES 39 THROUGH 43 ARE
35.	Treatment - Mortality	COMPLETED BY THE ZONE CENTER
	(0) No treatment	
	(1) Fatal	_
	(2) Fatal - ruled disease (specify):	39. Time to Death
		Code number of hours from time of
	Nonfatal	accident to time of death up through 24
	(3) Hospitalization	hours. If time of death is greater than 24
	(4) Transported and released	hours, code number of days. (Note: 1 day =
	(5) Treatment at scene - nontransported	31, 2 days = 32, n days = 30 +n up through 30 days = 60)
	(6) Treatment later	(00) Not fatal
	(8) Treatment - other (specify):	(96) Fatal - ruled disease
		(99) Unknown
	(9) Unknown	
l		
36	Type Of Medical Facility (for Initial Treatment)	40. 1st Medically Reported Cause of Death ()
00.	(0) Not treated at a medical facility	41. 2nd Medically Reported Cause of Death
	(1) Trauma center	41. 2nd Medically Reported Cause of Death
	(2) Hospital	42. 3rd Medically Reported Cause of Death
	(3) Medical clinic	Code the Occupant Injury from line
	(4) Physician's office	number(s) for the medically reported
	(5) Treatment later at medical facility	injury(s) which reportedly contributed to
	(8) Other (specify):	this occupant's death
	(9) Unknown	(00) Not fatal or no additional causes
		(96) Mode of death given but specific injuries are not linked to cause
		of death. (specify):
37.	Hospital Stay <u>O</u> <u>O</u>	or death. (specify).
	(00) Not Hospitalized	(97) Other result (includes fatal ruled
	Code the number of days (up through 60)	disease) (specify):
l	that the occupant stayed in hospital.	
	(61) 61 days or more (99) Unknown	(99) Unknown
	(99) Olikilowii	
		43. Number of Recorded Injuries for
İ		This Occupant
		Code the actual number of
		injuries recorded for this occupant.
		(00) No recorded injuries
		(97) Injured, details unknown
		(99) Unknown if injured
	•	

	AUTOMATIC BELT SYSTEM	45	48.	Automatic (Passive) Belt Failure Modes
	Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown Automatic (Passive) Belt System Use	0		During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
46.	(0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown Automatic (Passive) Belt System Type (0) Not equipped/not available	0		Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify): (9) Unknown
	 (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown 			Check the Primary Source Used In Determining Belt Use.
	Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat			 Not equipped/not available/destroyed or rendered inoperative Vehicle inspection Official injury data Driver/occupant interview Other (specify):
	 Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): 		1	[] Unknown if belt used
	(8) Other improper use of automatic belt system (specify):(9) Unknown	1		
	ARE ALL APPLICABLE MEDICAL REC WITH INITIAL SUBMISSION?	COR	IDS I	INCLUDED NO [)] YES []
	UPDATE CANDIDATI	E?		NO [] YES \[\sqrt{}

STOP - VARIABLES 50 THROUGH 53 ARE COMPLETED BY THE ZONE CENTER	BELT USE DETERMINATION
COMPLETED BY THE ZONE GENTER	53. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed
TRAUMA DATA	or rendered inoperative (1) Vehicle inspection
50. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured	(2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used
51. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given	
52. Arterial Blood Gases (ABG) - HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of theHCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured	

Administration

U.S. Department of Transportation National Highway Traffic Safety

OCCUPANT INJURY FORM

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

3. Vehicle Number

2. Case Number - Stratum

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	Source of Injury Data	/ Body Region		nic Anatomic	: Level of	f A.I.S. Severity	- / Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
1st	5.3	6	7.6	8.04	9. <u>/ 0</u>	10. 2	11	12.54	13	14	15. <u>02</u>
2nd	16.3	17. 丄	18. 9	19. <u>D</u>	20.02	- 21. <u> </u>	22	23. <u>54</u>	24	25/	26. <u>02</u>
3rd	27.3	28	29. 9	30. <u>Д</u>	31.02	32. <u>/</u>	33/	34. <u>54</u>	35	36	37. <u>0</u> 2
4th	38. 3	39. 🗸	40. 4	41. <u>0</u> <u>2</u>	42. <u>78</u>	43	44. <u>6</u>	45. <u>54</u>	46	47. 2	48. <u>0</u> 2
5th	49.3	50. 7	51. <u>9</u>	52.08	53.02	54	55	56. <u>9</u> 7	57. <u>9</u>	58. 7	59. <u>99</u>
6th	60.3	61. 8	62. 9	63. 10 4	64. 02	65. <u>/</u>	66. <u>/</u>	67. <u>30</u>	68	59. <u> </u>	70.97
7th	71.3	72. 🔏	73. 9	74.04	75. <u>0</u> <u>2</u>	76	77	78. <u>/ /</u>	79 8	80. <u>/</u> 1	81. <u>Ø</u>
8th	82	83	84	85	86	87	88	89	90 9	91	92
9th	93	94	95	96	97	98	99	100	101 10	02 10	03
10th	104	105	106	107	108	109	110	111	112 1	13 1	14

	OCCUPANT INJURY D							DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure		A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number	
11th												
12th									- .			
13th	_		_						· -	· .		
14th							 -			_		
15th											· · · · · · · · · · · · · · · · · · ·	
16th	_			, , ,					· <u></u>			
17th							_	 .		. 		
18th		<u> </u>								, , , , , , , , , , , , , , , , , , ,		
19th					*	···						
20th	_						-				e e e e e e e e e e e e e e e e e e e	
21st										. 		
22nd	<u> </u>											
23rd												
24th	. 	<u></u>							in a de la Alguna			
25th			. ·									

SOURCE OF INJURY DATA

- (1) Autopsy records with or without hospital/ medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL

- (5) Lay coroner report
- (6) E.M.S. personnel
- Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

FRONT

- (01) Windshield
- (O2) Mirror
- (03) Sunvisor
- (04) Steering wheel rim
- (05) Steering wheel hub/spoke
- (06) Steering wheel (combination of codes 04 and 05)
- (07) Steering column, transmission selector lever, other attachment
- (08) Add on equipment (e.g., CB, tape deck, air conditioner)
- (09) Left instrument panel and below
- (10) Center instrument panel and below
- (11) Right instrument panel and below
- (12) Glove compartment door
- (13) Knee bolster
- (14) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (15) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (16) Driver side air bag compartment cover
- Passenger side air bag compartment cover (18)Windshield reinforced by exterior object
- (specify):
- (19) Other front object (specify):

LEFT SIDE

- (20) Left side interior surface.
- excluding hardware or armrests
- (21) Left side hardware or armrest (22) Left A (A1/A2)-pillar
- (23) Left B-pillar
- (24) Other left pillar (specify):

- (25) Left side window glass or frame
- (26) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (27) Other left side object (specify):
- (28) Left side window sill

RIGHT SIDE

- (30) Right side interior surface, excluding hardware or armrests
- Right side hardware or armrest
- (32) Right A (A1/A2)-pillar
- Right B-pillar (33)
- Other right pillar (specify): (34)
- (35) Right side window glass or frame
- (36) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (37) Other right side object (specify):
- (38) Right side window sill

INTERIOR

- (40) Seat, back support
- (41) Belt restraint webbing/buckle
- (42) Belt restraint B-pillar or door frame attachment point
- (43) Other restraint system component (specify):
- (44) Head restraint system
- (45) Air bag (use codes "16" and "17" for injuries sustained from air bag compartment covers)
- (46) Other occupants (specify):
- (47) Interior loose objects
- (48) Child safety seat (specify):
- (49) Other interior object (specify):

ROOF

- (50) Front header
- (51) Rear header
- (52) Roof left side rail
- (53) Roof right side rail
- (54) Roof or convertible top

FLOOR

- (56) Floor (including toe pan)
- (57) Floor or console mounted transmission lever, including console
- (58) Parking brake handle
- (59) Foot controls including parking brake

REAR

(60) Backlight (rear window)

- (61) Backlight storage rack, door, etc.
- (62) Other rear object (specify):

EXTERIOR of OCCUPANT'S VEHICLE

- (65) Hood
- (66) Outside hardware (e.g., outside mirror, antenna)
- Other exterior surface or tires (specify):
- (68) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (70) Front bumper
- (71) Hood edge
- (72) Other front of vehicle (specify):
- (73) Hood
- (74) Hood ornament
- (75) Windshield, roof rail, A-pillar
- (76) Side surface (77)Side mirrors
- (78) Other side protrusions (specify)
- (79) Rear surface
- (80) Undercarriage
- (81) Tires and wheels
- (82) Other exterior of other motor vehicle (specify):
- (83) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE **ENVIRONMENT**

- (84) Ground
- (85) Other vehicle or object (specify)
- (86) Unknown vehicle or object

NONCONTACT INJURY

- (90) Fire in vehicle
- (91) Flying glass
- (92) Other noncontact injury source (specify):
- Air bag exhaust gases
- (97) Injured, unknown source

INJURY SOURCE CONFIDENCE LEVEL

- (1) Certain
- Probable 121
- Possible (3) (9) Unknown

DIRECT/INDIRECT INJURY

- Direct contact injury
- Indirect contact injury
- (3) Noncontact injury
- Injured, unknown source

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Neck
- Thorax
- (5) Abdomen (6) Spine
- **Upper Extremity**
- Lower Extremity (8) Unspecified
- Type of Anatomic Structure
- (1) Whole Area
- Vessels (3) Nerves
- Organs (includes muscles/
- (5) Skeletal (includes joints)
- Head LOC
- (9) Skin

Specific Anatomic Structure

- Whole Area (02) Skin Abrasion
- (04) Skin Contusion (06) Skin Laceration
- Skin Avulsion (08)
- (10) Amputation (20) Burn
- (30) Crush
- (40) Dealovina
- Injury NFS Trauma, other than mechanical

- Head LOC (02) Length of LOC
- (04, 06, 08) Level of Consciousness
- (10) Concussion

- Cervical
- (04) Thoracic (06) Lumbar
- Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the , 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor injury
- (2) Moderate injury
- Serious injury
- Severe injury Critical injury (5)
- Maximum (untreatable) Injured, unknown severity

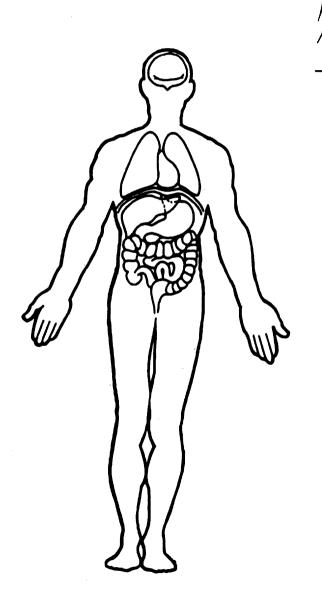
Aspect

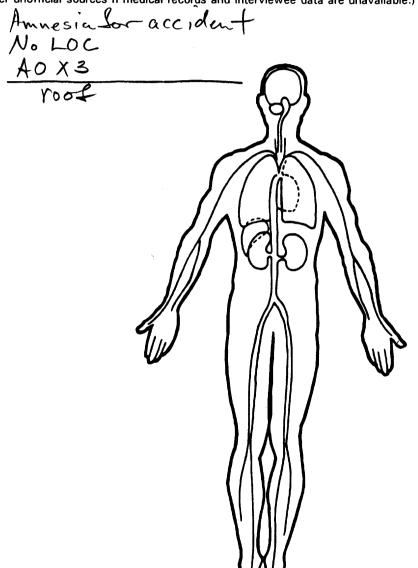
- Right
- Bilateral
- (4) (5) Central Anterior
- (6) Posterior (7) (8) Superior Inferior
- (0) Whole region

OFFICIAL INJURY DATA — SKELETAL INJURIES Restrained? Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.) **Blood Alcohol** Level (mg/dl) BAL = ____ Glasgow Coma Scale Score GCSS = Units of Blood Given Units = Arterial Blood Gases HCO₃

OFFICIAL INJURY DATA - INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

Page 2

	OCCUPANT RELATED	24. Rollover
16.	Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown	(0) No rollover (no overturning) **Rollover (primarily about the longitudinal axis)* (1) Rollover, 1 quarter turn only (2) Rollover, 2 quarter turns (3) Rollover, 3 quarter turns
17.	Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle (97) 97 or more (99) Unknown	(4) Rollover, 4 or more quarter turns (specify): ———————————————————————————————————
18.	Number of Occupant Forms Submitted	(9) Rollover (overturn), details unknown
	VEHICLE WEIGHT ITEMS	OVERRIDE/UNDERRIDE (THIS VEHICLE)
19.	Code weight to nearest 10 kilograms.	25. Front Override/Underride (this Vehicle) 26. Rear Override/Underride (this Vehicle)
	(045) Less than 450 kilograms (610) 6,100 kilograms or more (999) Unknown	(0) No override/underride, or not an end-to-end impact
	, lbs X .4536 =, kgs Source:	Override (see specific CDC) (1) 1st CDC (2) 2nd CDC
20.	Vehicle Cargo WeightOde weight to nearest0,	(3) Other not automated CDC (specify):
	(000) Less than 5 kilograms (450) 4,500 kilograms or more (999) Unknown	Underride (see specific CDC) (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):
	,lbs X .4536 =,kgs	(o) Other not automated CDC (specify).
21.	RECONSTRUCTION DATA Towed Trailing Unit (0) No towed unit	(7) Medium/heavy truck or bus override (9) Unknown
	(1) Yes—towed trailing unit (9) Unknown	HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V
22.	Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown
23.	Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify):	27. Heading Angle For This Vehicle 28. Heading Angle For Other Vehicle 999
	(9) Unknown	

Cate- gory	Contigur-	ACCIDENT TYPES (Includes Intent)		
	A Right Roadside Departure	DRIVE OFF CONTROL/ ROAD TRACTION LOSS WITH VEH., PED		CIFICS KNOWN
Single Driver	B Left Roadside Departure	DRIVE OFF CONTROL/ AVOID COLLISION TRACTION LOSS WITH VEH PED		CIFICS KNOWN
-	C Forward Impact	PARKED VEH. STA. OBJECT PEDESTRIAN/ ANIMAL DEPARTS	15 16 SPECIFICS SPE	GIFICS KNOWN
۶.	D Rear-End	20 21 24 25 22 37 31 SLOWER DECEL. 21. 22. 23 31. 23. 27 28. 29. 31.	31 SPECIFICS SPE	CH • 33)
I Sane Sank	E Forward Impact	COMINOR COMINGE	OID COLLISION SPECIFICS	EACH • 43) BPECIFICS UNKNOWN
	F Sideswipe Angle	44 45 46 SPECIFICS OTHER	8) (EACH • 45 SPECIFICS U	
es; Tron	G Head-On	50 51 (EACH • 52) (EACH • 12)	E3) E UNKNOWN	
Same Traificway Opposite Direction	H Forward Impact			EACH • (3) SPECIFICS UNKNOWN
=	l. Sideswipe: Angle	(EACH • 66) (EACH • 66) SPECIFICS SPECIFIC LATERAL MOVE OTHER	67) B UNKNOWN	vi.,
Change Trafficway Vehick Turning	J. Turn Across Path	INITIAL OPPOSITE INITIAL SAME DIRECTIONS		ACH • 76) PECIPICS NKNOWN
IV. Change Trafficw Vehicle Turning	K. Turn Into Path	TURN INTO SAME DIRECTION TURN INTO OPPOSITE DI		EACH • 85) SPECIPICS JNKNOWN
V Intersecting Paths (Vehicle Damage)	L. Straight Paths	SPECIFIC OTHER	(EACH • 91)	NOWN
VI Miscel- laneous	M. Backing Eic.	OR OBJECT 90 Uni	er Accident Type known Accident Type Impect	

National Accident Sampling System-Crashworthiness Data System: General Vehicle Form

OTHER DATA	61. Rollover Initiation Object Contacted
56. Driver's Zip Code	
(00000) Driver not present (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99999) Unknown	62. Location on Vehicle Where Initial Principal Tripping Force Is Applied (0) No rollover (1) Wheels/tires
57. Driver's Race/Ethnic Origin (0) Driver not present (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (8) Other (specify):	(2) Side plane (3) End plane (4) Undercarriage (5) Other location on vehicle (specify): (8) Non-contact rollover forces (specify): (9) Unknown
(9) Unknown 58. Vehicle Special Use (This Trip) (0) No special use (1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance	 (0) No rollover (1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (5) End-over-end (i.e., primarily about the lateral axis) (9) Unknown roll direction
(7) Fire truck or car (8) Other (specify):(9) Unknown	PRECRASH DATA 64. Pre-Event Movement (Prior to Recognition of Critical Event)
ROLLOVER DATA If GV07 (Body Type) ≠ 1-49, leave GV59-GV63 blank. If GV24 (Rollover) = 0, then GV59-GV63 must equal 0. If GV24 = 9, then GV59-GV63 must equal 9.	(01) Going straight (02) Slowing or stopping in traffic lane (03) Starting in traffic lane (04) Stopped in traffic lane (05) Passing or overtaking another vehicle
59. Rollover Initiation Type (0) No rollover (1) Trip-over (2) Flip-over (3) Turn-over (4) Climb-over (5) Fall-over (6) Bounce-over (7) Collision with another vehicle (8) Other rollover initiation type specify):	(06) Disabled or parked in travel lane (07) Leaving a parking position (08) Entering a parking position (09) Turning right (10) Turning left (11) Making a U-turn (12) Backing up (other than for parking position) (13) Negotiating a curve (14) Changing lanes (15) Merging (16) Successful avoidance maneuver to a previous critical event
(9) Unknown rollover initiation type 60. Location of Rollover Initiation	(97) Other (specify): (98) No driver present (99) Unknown
(0) No rollover (1) On roadway (2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (9) Unknown	

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover	(57) Fence
(01-30) — Vehicle Number	(58) Wall
	(59) Building
Noncollision	(60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(33) Jackknife	(62) Fire hydrant
	(63) Curb
Collision With Fixed Object	(64) Bridge
(41) Tree (≤ 10 cm in diameter)	(68) Other fixed object (specify):
(42) Tree (> 10 cm in diameter)	(12)
(43) Shrubbery or bush	(69) Unknown fixed object
(44) Embankment	(00, 0
·	Collision with Nonfixed Object
(45) Breakaway pole or post (any diameter)	(71) Motor vehicle not in-transport
(10) Broakarray polo or poor (arry diamotor)	(76) Animal
Nonbreakaway Pole or Post	(77) Train
(50) Pole or post (≤ 10 cm in diameter)	(78) Trailer, disconnected in transport
(51) Pole or post (\geq 10 cm but \leq 30 cm in	(79) Object fell from vehicle in-transport
diameter)	· · · · · · · · · · · · · · · · · · ·
	(88) Other nonfixed object (specify):
(52) Pole or post (> 30 cm in diameter)	(00) II-l
(53) Pole or post (diameter unknown)	(89) Unknown nonfixed object
(54) Concrete traffic barrier	(98) Other event (specify):
(55) Impact attenuator	(00, 00.00 0000 (0000.))
(56) Other traffic barrier (includes guardrail) (specify):	(99) Unknown event or object

PSU NUMBER
CASE NUMBER
VEHICLE NUMBER

48 227K 03

EXTERIOR VEHICLE FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

M	ENTIRE FORM	•
[]	Page Number (s)	-

PSU NUMBER
CASE NUMBER
VEHICLE NUMBER

<u>48</u> <u>2</u>27K 03

INTERIOR VEHICLE FORM

THE FOLLOWING DATA IS NOT INCLUDED IN THIS CASE:

- M ENTIRE FORM
- [] Page Number (s)



U.S. Department of Transportation

CRASHPC PROGRAM SUMMARY

Nationa	al Highway	Traffic	Safety	

(All Measurements In Metric)

NATIONAL ACCIDENT SAMPLING SYSTEM

Administration				CRASHWORTHI	NESS DATA SYSTEM
Identifying Title	2 2 7 Y	,	<u> </u>		7 U
48	221K	(/
Primary Sampling Unit	Case NoStratum		cident Event equence No.	Date (Month, day, year) o	f Run
CRASHPC Vehicle Id		.		50 00 - 6.10	
Vehicle 1	1986	CHOV		Spect Rum	
Vehicle 2	1989	<u>GMC</u>		5-15	
	Year	Make		Model	NASS Veh. No.
	GE	NERAL IN	FORMATIC	ON	
	VEHICLE I	,		VEHICLE 2	
Size)	Size		<u> </u>
Weight			Weight		2 7
883 + 136 +	<u>45 = 1 0 6 °</u>	∠ kg	1201 +	136 + 2 = 1 3	3/ kg
•	Cargo	. 1 3		cupant(s) Cargo	< 13
CDC	1 1 P D E		CDC	02 R D	
PDOF (-180 to +180))		•	0 to +180)	15% a
Stiffness	-(30		Stiffness	X40	J 3
	S	CENE INF	ORMATION	V	
Rest and Impact Posi	itions [] No, <i>Go To i</i>	Damage Info	rmation []] Yes	
	VEHICLE 1	····	······	VEHICLE 2	
Rest	x	m	Rest	х	m
Position	Υ	m	Position	Υ	m
	PSI	°		PSI	o
Impact	X	. m	<u>I</u> mpact	X	. m
Position	Υ	. m	Position	Υ ———	m
	PSI	0		PSI	
Slip Angle(-180 to +	180)		Slip Angle	(-180 to +180)	o
•		VEHICLE		-	
Sustained Contact	1 No. 1 1 Ves				
	VEHICLE 1			VEHICLE 2	
Vehicle Rotation	[] No	[] Yes	Vehicle Rot	tation [] N	lo []Yes
Rotation Stop Be		[] Yes	*************************	n Stop Before Rest [] N	************
End of Rotation Position	x	m	End of Position	Rotation X	m
FUSITION	Υ	m	Position	V	m
	PSI	°		PSI	o
Curved Path	I] No I	[] Yes	Curved Pat	h []N	lo [] Yes
Point on Path			Point o		
x	m Y	m	Х	m Y	m
	[] None) CCW	Rotation Di Rotation		W [] CCW

FRICTION	INFORMATION	TRAJECTO	RY INFORMATION
Coefficient of Friction		Trajectory Data [
Rolling Resistance Op		If No, Go To Damage	
110			
Vehicle 1 Rolling	Resistance	Vehicle 1 Steer Angl	
	RF		O RF O
	RR	LR	° RR °
		Vahiola 2 Stoor Anal	
Vehicle 2 Rolling	Resistance	Vehicle 2 Steer Angl	
	RF	LR	° RF
	RR	Ln	nn
		Terrain Boundary [] No [] Yes
		First Point	
		X m	n Y m
		Second Point	
			Y m
		1	
		Secondary Coefficien	nt of Friction
	DAMAGE II	NFORMATION	
V	'EHICLE 1	V	EHICLE 2
	L 150 cm		
Damage Length	L cm	Damage Length	L <u>2 78</u> cm
Crush Depths	C ₁	Carrate Davide	•
Crosii Deptiis	$C_1 = \frac{1}{2} \frac{0}{2} \text{ cm}$ $C_2 = \frac{2}{2} \frac{2}{2} \text{ cm}$	Crush Depths	C ₁ O cm
	$C_2 = \frac{2}{2} \frac{2}{9} cm$		$C_2 \qquad \underline{\qquad} \qquad \underline{\qquad} \qquad \mathcal{S} \qquad \text{cm}$
			$C_3 = \frac{2}{7} \text{ cm}$
	$C_4 = 3 - 9 \text{ cm}$ $C_6 = 4 - 5 \text{ cm}$		C ₄
			C ₆
	C ₆ 6_7_cm		C ₆
Damage Offset	D cm	Damage Offset	D Φ 185 cm
IF THIS COMMON IM	PACT WAS WITH A MOTOR VEHICL	E <i>NOT IN TRANSPORT,</i> FILL	. IN THE INFORMATION BELOW.
			e Data and Damage Information
Model:		for this vehicle should be	oe recorded above.
VIN:			
V 11V.			
Complete a	nd ATTACH the engrapsies with	de de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	
Complete al	nd ATTACH the appropriate vehic	cle damage sketch and dim	nensions to the Form.

FINAL RUN ZZ

SUMMARY OF CRASHPC RESULTS USING DAMAGE

CRASH3 RECONSTRUCTION

SPEED CHANGE (DAMAGE)

VEHICLE #1

 TOTAL
 37 KPH (23 MPH)

 LONGITUDINAL
 -34 KPH (-21 MPH)

 LATITUDINAL
 13 KPH (8 MPH)

PDOF ANGLE -20 DEGREES

ENERGY DISSIPATED = 75673 JOULES (55806 FT-LB)

VEHICLE #2

TOTAL 29 KPH (18 MPH)
LONGITUDINAL -19 KPH (-12 MPH)
LATITUDINAL -22 KPH (-14 MPH)
PDOF ANGLE 50 DEGREES

ENERGY DISSIPATED = 47838 JOULES (35279 FT-LB)

DAMAGE DATA

VEHICLE #2

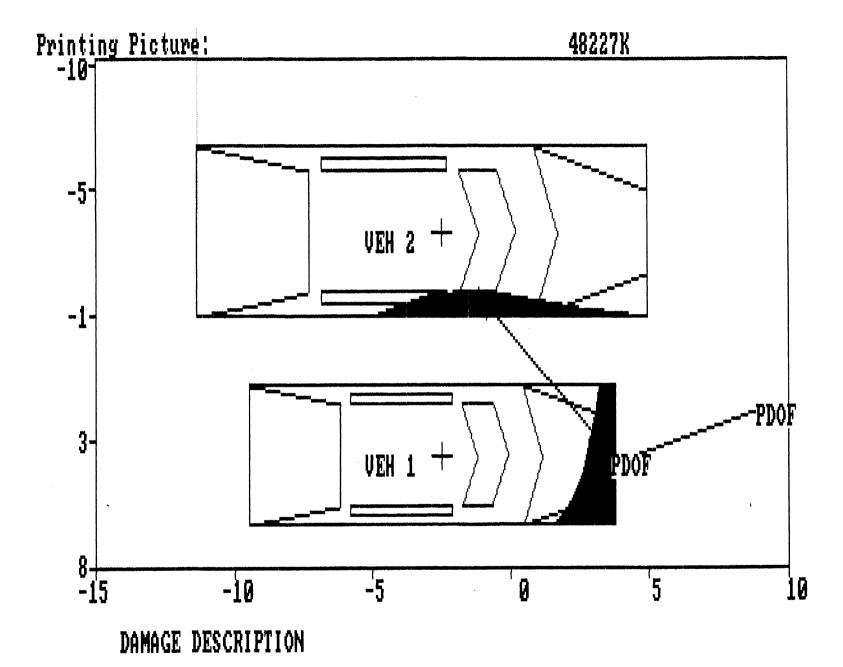
(* INDICATES DEFAULT VALUE)

VEHICLE #1

1	3										
1.	3										
10 64 K G S (2346 LBS)	1337 K G S (2948 LBS)										
11FDEW3	02RDEW3										
-20 DEGREES	50 DEGREES										
150 CM. (59 IN.)	278 CM. (109 IN.)										
18 CM. (7 IN.)	0 CM. (0 IN.)										
22 CM. (9 IN.)	18 CM. (7 IN.)										
29 CM. (11 IN.)	27 CM. (11 IN.)										
34 CM. (13 IN.)	16 CM. (6 IN.)										
45 CM. (18 IN.)	6 CM. (2 IN.)										
67 CM. (26 IN.)	O CM. (O IN.)										
O CM. (O IN.)	69 CM. (27 IN.)										
16 CM. (6 IN.)	49 CM. (19 IN.)										
	11FDEW3 -20 DEGREES 150 CM. (59 IN.) 18 CM. (7 IN.) 22 CM. (9 IN.) 29 CM. (11 IN.) 34 CM. (13 IN.) 45 CM. (18 IN.) 67 CM. (26 IN.) 0 CM. (0 IN.)										

DIMENSIONS AND INERTIAL PROPERTIES

	VEHICLE #1	VEHICLE #2							
CG TO FRONT AXLE	115 CM. (45 IN.)	130 CM. (51 IN.)							
CG TO REAR AXLE	122 CM. (48 IN.)	141 CM. (56 IN.)							
TRACK	130 CM. (51 IN.)	150 CM. (59 IN.)							
CG TO FRONT OF VEH	193 CM. (76 IN.)	228 CM. (90 IN.)							
CG TO REAR OF VEH	-213 CM. (-84 IN.)	-270 CM. (-106 IN.)							
CG TO SIDE OF VEH	77 CM. (30 IN.)	92 CM. (36 IN.)							
MOMENT OF INERTIA	5550 KGS (12235 LBS)	11555 KGS (25475 LBS)							
VEHICLE MASS	3 KGS (6 LBS)	3 KGS (8 LBS)							



SUMMARY OF CRASHFC RESULTS USING DAMAGE

p48 227K 01

SPEED CHANGE (DAMAGE)

VEHICLE #1

35 KPH (22 MPH) -27 KPH (-17 MPH) TOTAL LONGITUDINAL

LATITUDINAL ANGLE 23 KPH (14 MPH)

-40 DEGREES

ENERGY DISSIPATED = 113868 JOULES (83974 FT-LB)

VEHICLE #2

28 KPH (17 MPH) TOTAL

LONGITUDINAL -18 KPH (-11 MPH)
LATITUDINAL -21 KPH (-13 MPH)
PDOF ANGLE 50 DEGREES

ENERGY DISSIPATED = 47838 JOULES (35279 FT-LB)

DAMAGE DATA

VEHICLE #1

VEHICLE #2

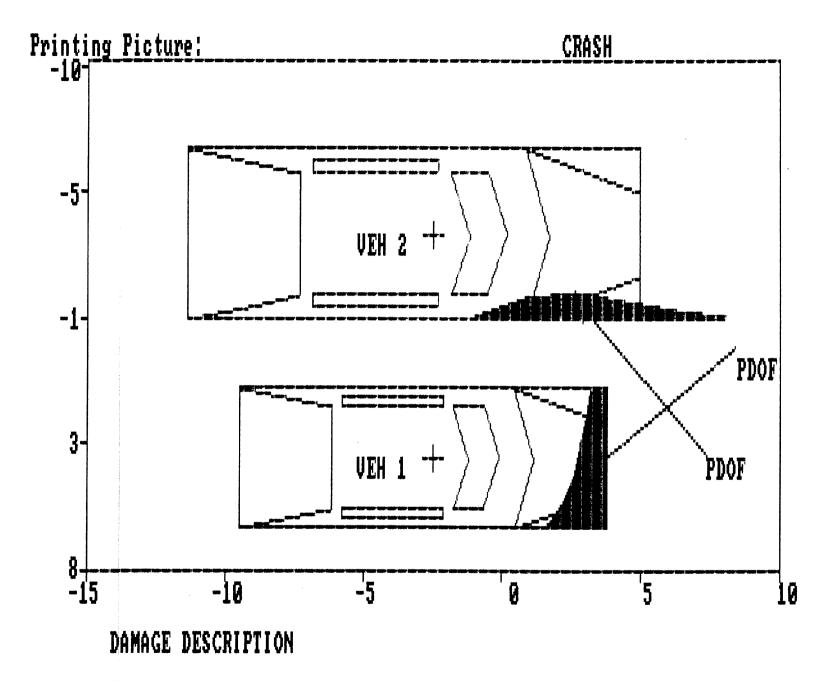
SIZE CATEGORY	1.	3										
STIFFNESS CATEGORY	1	3										
VEHICLE WEIGHT	1064 KGS (2346 LBS)	1337 KGS (2948 LBS)										
CDC	11FDEW3	02RDEW3										
PDOF ANGLE	-40 DEGREES	50 DEGREES										
CRUSH LENGTH	150 CM. (59 IN.)	278 CM. (109 IN.)										
C1	18 CM. (7 IN.)	0 CM. (0 IN.)										
C2	22 CM. (9 IN.)	18 CM. (7 IN.)										
C3	29 CM. (11 IN.)	27 CM. (11 IN.)										
04	34 CM. (13 IN.)	16 CM. (6 IN.)										
C5	45 CM. (18 IN.)	6 CM. (2 IN.)										
C6	67 CM. (26 IN.)	0 CM. (0 IN.)										
D	0 CM. (0 IN.)	185 CM. (73 IN.)										
D'	16 CM. (6 IN.)	165 CM. (65 IN.)										

(* INDICATES DEFAULT VALUE)

DIMENSIONS AND INERTIAL PROPERTIES

•		 • •••	•••	-	•			•	•	 	-	 	•	•	-	٠.	•		٠.	 •	****	• •	•	-	 	
	•••••	 				 	 .			 	 	 						 		 			_		 	

	VEHICLE #1	VEHICLE #2	
CG TO FRONT AXLE	115 CM. (45 IN.)	130 CM. (51 IN.)	
CG TO REAR AXLE	122 CM. (48 IN.)	141 CM. (56 IN.)	
TRACK	130 CM. (51 IN.)	150 CM. (59 IN.)	
CG TO FRONT OF VEH	193 CM. (76 IN.)	228 CM. (90 IN.)	
CG TO REAR OF VEH	-213 CM. (-84 IN.)	-270 CM. (-106 IN.)	
CG TO SIDE OF VEH	77 CM. (30 IN.)	92 CM. (36 IN.)	
MOMENT OF INERTIA	5550 KGS (12235 LBS)	11555 KGS (25475 LBS)	
VEHICLE MASS	3 KGS (6 LBS)	3 KGS (8 LBS)	





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48227K00000011 947.03000000000000307350000003 94 94 94 95 95 94185591000
001504000279129
48227K00010012 947.031000000000101F0215R
48227K00020012 947.031000000000215T3100N
48227K00030012
               947.0310000000000215L0315F
48227K01000021
                  7.03 00000000862003103J81RF7778G8 10240960720169102020
880000000000901981037-034+0130757110
                 48227K01000022
48227K01000031
                 7.03 000000000010271FDEW03
                                                    128018022029034045067
000
                         01240000104020101001000
48227K01000041
                 48227K01000042
                  7.03 000000000130532221932211922999999
                       0000261180
48227K01010051
                  7.03 0000000016119108211100000040000000302100000000000341
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48227K01010161
                  7.03 000000000329060214011100
48227K01010261
                  7.03 000000000329020214011100
48227K01010361
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48227K01010561
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48227K01020051
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01970000000005000001151011
48227K01020161
                 7.03 000000000216020220012100
48227K01020261
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48227K01020361
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48227K01020461
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200000002001980901028-018-0210478110
48227K02000022
                 48227K02000031
                  7.03 00000000010102RDEW03023100TDYD03278000018027016006000+
185
                         11275000104050101001000
48227K02000041
                  7.03 0000000098130000000026688688000000001880080012200100
48227K02000042
                  7.03 000000001313211312211315211113211317231212211112211314
211215111214111
                       0000167080
48227K02010051
                  7.03 000000001711830701110000004041100040051000000000000065
00970000000002000001151011
48227K02010161
                  7.03 000000000364027816041100
48227K02010261
                  7.03 000000000329040218041100
48227K02020051
                  7.03 00000000151183073213000000404110004005100000000000365
00970000000007000001151011
48227K02020161
                 7.03 000000000316041020541102
48227K02020261
                 7.03 000000000319020211541102
48227K02020361
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48227K02020561
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48227K02020761
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48227K03000021
                  7.03 000000008820471301GCBS14EXJ210098300000960400198102009
99999000000009995999 999 9999999000
                  48227K03000022
0000000000000
```

GENERAL VEHICLE Vehicle: 2 11 INTRA ERRORS

OGGO421 2 If ROLLOVER GV24 equals 1-9, then BASIS FOR DELTA V GV29 should GG0422 equal 4 or 5.

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PSU48

ERROR SUMMARY SCREEN



CASE 227K

CURRENT VERSION: 7.03

FORM NAME	NUMBER OF DOLLAR SIGNS	NUMBER OF LEVEL 1 ERRORS	NUMBER OF LEVEL 2 ERRORS	VERSION NUMBER CONSISTENT
Accident	0	0	0	Y
General Vehicle	0	O	1	Ý
Vehicle Exterior	0	0	0	Y
Vehicle Interior	0	O	0	Y
Occupant Assesment	0	0	0	Υ
Occupant Interior	0	О	O	Y
Total Inter Errors		o	o	
Total Case Errors	0	0	1	



U.S. Department of Transportation

National Highway Traffic Safety Administration

SLIDE INDEX

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Primary S	ampling Ur	nit Number	4 8 Case Number – Stratum 2 2 7 K		
Slide No.	Vehicle No.	Direction of Picture	Description of Slide Subject Matter		
1-4	1	E	Direction of travel.		
5-6	1	E	Area of impact.		
7	1	SE	Area of final rest.		
8-10	2	w	Direction of travel.		
_11	2	sw	V2 turns left.		
12	2	SW	Area of impact.		
13	2	SE	Path to final rest and impact with V3.		
14	2	NW	Opposite view from final rest.		
15	2	NE	Opposite view from impact.		
16-18	3	N	Direction of travel.		
19	3	N	Area of impact and final rest.		
20	3	S	Opposite views.		
21-37	1		Exterior views.		
38-53	1		Interior views.		
54-72	2		Exterior views.		
73-83	2		Interior views.		
W. 455 - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.					











































vailable





K (1994)#23







/K (1994)#2











st Available







K (1994) #34







/K (1994)#37 vollable







Best Available







vailable



ailable



Best Available





22/K (1994)#4/





















































:/K(1994)#.









/K(1994)#//



Best Available



lable



Best Available



st Available



